

ARTICLE II

HEALTH, WELFARE, AND REHABILITATION AGENCIES

Section 1. The several sums of money herein specified, or so much thereby as may be necessary, are appropriated out of any funds in the State Treasury not otherwise appropriated, for the support, maintenance, or improvement of the designated state agencies and institutions.

DEPARTMENT ON AGING

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: LOCALLY-BASED SERVICES		
To provide an accessible, locally-based, comprehensive, and coordinated system of services; protection and information about benefits; and opportunities for older people which are designed to provide older Texans with healthy and productive lives within a safe living environment.		
A.1. Objective:		
Serve eligible Texans with cost-effective community-based services		
Outcomes:		
Percent of Older Population Receiving at Least One Service	10%	10%
Percent Change in Persons Receiving One or More Community Services	5%	5%
Percent of Weekly Dietary Requirements Met by Meals (Average)	21%	21%
Percent of Older Population Receiving Services Who are Minorities - Hispanic	18%	18%
Percent of Older Population Receiving Services Who are Minorities - African-American	15%	15%
Percent of Older Population Receiving Services Who are Below the Poverty Level	45%	45%
Percent of Older Population Receiving Services Who are Moderately to Severely Impaired	45%	45%
Percent of 60+ Population in Nursing Homes (Annual)	3.88%	3.88%
Percent of Nursing Homes With Functioning Family Councils	60%	80%
A.1.1. Strategy: INFORMATION & ASSISTANCE		
Provide a statewide, locally-based system of information and assistance which includes advocacy for the removal of barriers to service access to all eligible Texans, especially frail, low-income, and minority older people by September 1994.		
	\$ 4,678,586	\$ 4,678,586
Outputs:		
Number of Inquiries	72,000	72,000
Number of People Receiving Case Management	11,000	11,000
Efficiencies:		
Cost per Case Management Hour	41	41
A.1.2. Strategy: HOMEMAKER SERVICES		
Provide a statewide, locally-based system of services designed to assist with daily living through the provision of homemaker services.		
	\$ 2,599,104	\$ 2,749,104
Outputs:		
Number of Hours of Homemaker Services Provided	385,000	395,000
Efficiencies:		
Cost per Homemaker Hour	7.95	8.15

DEPARTMENT ON AGING
(Continued)

A.1.3. Strategy: HOME REPAIR & RENOVATION

Provide a statewide, locally-based system for capital renovation to elder Texans' homes in order to foster independence.

\$ 161,605 \$ 161,605

Outputs:

Number of Homes Repaired/Modified

1,030 1,030

Efficiencies:

Cost per Modified Home

380 380

A.1.4. Strategy: NURSING HOME OMBUDSMAN

Provide a statewide, locally-based system of services designed to prevent injury or harm to individuals at home or in long term care facilities through nursing home ombudsman services, adult day care services, and elder abuse awareness efforts.

\$ 1,789,434 \$ 1,789,434

Outputs:

Number of People Receiving Emergency Response Services

1,000 1,000

Number of Nursing Homes With Functioning Family Councils

660 880

Number of People Receiving Adult Day Care

200 200

Efficiencies:

Number of Nursing Home Beds per Ombudsman

130 100

A.1.5. Strategy: PERSONAL INDEPENDENCE

Provide a statewide, locally-based system of services designed to increase personal independence, including legal assistance, benefits counseling, health education and health screening, physical fitness programs, and transportation services.

\$ 8,031,177 \$ 7,881,177

Outputs:

Number of People Receiving Legal Assistance Services

11,500 9,000

Number of Hours of Legal Assistance Provided

50,000 45,000

Number of People Receiving Health Screening/Monitoring Services

2,500 1,500

Number of One Way Trips (Demand Response Transportation Services)

3,300,000 3,000,000

Efficiencies:

Cost per Hours of Legal Assistance

31 31

Cost per One Way Trip (Demand Response Transportation Services)

3.58 3.58

A.1.6. Strategy: VOLUNTEER & EMPLOYMENT

Provide a statewide, locally-based system of services designed to provide opportunities for increased personal productivity through community service volunteering and subsidized employment services.

\$ 5,317,374 \$ 5,317,374

Outputs:

Number of People Served in Employment Services

837 837

Number of People Placed in Unsubsidized Employment

144 144

Following Program Enrollment

30,392 30,392

Number of RSVP Volunteers

30,392 30,392

Efficiencies:

Cost per Person Served in Employment Services

5.826 5.826

Cost per Hour in RSVP Service Provided

.06 .06

Cost per RSVP Volunteer

14.18 14.18

A.1.7. Strategy: HOME/CONGREGATE MEALS

Provide a statewide, locally-based system of meals designed to promote good health and to prevent illness.

\$ 33,091,919 \$ 33,091,919

Outputs:

Number of People Receiving Congregate Meals

145,000 145,000

Number of Congregate Meals Provided

8,500,000 8,500,000

DEPARTMENT ON AGING
(Continued)

Number of People Receiving Home Delivered Meals	60,000	60,000
Number of Home Delivered Meals Served	6,400,000	6,400,000
Efficiencies:		
Cost per Congregate Meal	4.25	4.52
Cost per Home Delivered Meal	4.35	4.63
Total, Objective A.1: Serve eligible Texans with cost-effective community-based services	\$ 55,669,199	\$ 55,669,199
Total, Goal A: LOCALLY-BASED SERVICES	\$ 55,669,199	\$ 55,669,199
B. Goal: SEC 146, 1993 SALARY INC		
Section 146, 1993 Salary Increase	\$ 47,239	
Grand Total, DEPARTMENT ON AGING	\$ 55,716,438	\$ 55,669,199
Method of Financing:		
General Revenue Fund	\$ 5,307,262	\$ 5,297,505
Federal Funds	50,279,176	50,241,694
Appropriated Receipts	10,000	10,000
Earned Federal Funds	120,000	120,000
Total, Method of Financing	\$ 55,716,438	\$ 55,669,199
Schedule of Exempt Positions and Per Diem of Commission Members		
Executive Director	\$55,697	\$55,697
Per Diem of Commission Members	4,400	4,400
Administrative and Support Cost as a Percent of Expenditures	4.4%	4.4%
<p>1. Capital Budget. None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.</p>		
	<u>1994</u>	<u>1995</u>
a. Acquisition or Lease-purchase of Information Resource Technologies:		
(1) Local Area Network	\$ 38,808	\$ 23,608
Total, Capital Budget	<u>\$ 38,808</u>	<u>\$ 23,608</u>
Method of Financing (Capital Budget):		
Federal Funds	\$ 38,808	\$ 23,608
Total, Method of Financing (Capital Budget)	<u>\$ 38,808</u>	<u>\$ 23,608</u>

DEPARTMENT ON AGING
(Continued)

2. **Data on RSVP Matching Funds Required.** It is the intent of the Legislature that the Department on Aging maintain data on the amount of matching funds required for federal grants to local retired senior volunteer programs. The department shall submit to the Legislative Budget Office and the Governor's Budget Office by October 1 of each fiscal year, a report in such detail as the two budget offices may require.
3. **Unit Cost Reporting Required.** It is the intent of the Legislature that the Texas Department on Aging develop a reporting system that clearly and accurately identifies the unit cost of each service provided by each Area Agency on Aging for all strategies except A.1.6. Strategy: VOLUNTEER & EMPLOYMENT, and that the results of this unit cost reporting be provided to the Legislative Budget Office and the Governor's Budget Office semi-annually and in a form that the two budget offices may require.
4. **Local Services/grants: Allocation of Funds.** Of the general revenue amounts appropriated above an amount not less than \$800,000 each year of the 1994-95 biennium shall be allocated for services provided by the Options for Independent Living program. Additionally, an amount of general revenue not less than \$1,591,875 each year of the 1994-95 biennium shall be used for the provision of home-delivered meals.
5. **Appropriation Source: Options for Independent Living.** All fees collected pursuant to V.T.C.A., Human Resources Code, Section 101.048, are hereby appropriated to the Department on Aging for the expansion of the Options for Independent Living program.
6. **Memorandum of Agreement: Options for Independent Living Program.** It is the intent of the Legislature that, in establishing the Options for Independent Living program, the Texas Department on Aging will maintain a Memorandum of Agreement with the Texas Department of Human Services which specifies that there will be no duplication of services to elderly clients served by the "Options" program and elderly clients served by the Texas Department of Human Services.
7. **Expenditure Authority.** The Texas Department on Aging is authorized to expend all funds collected from September 1, 1993 through August 31, 1995 and placed in a special account established by Section 13A, Texas Housing Finance Corporations Act (Article 12691-7, Vernon's Texas Civil Statutes). The funds shall be expended for the purposes stated within Articles 12691-6 and 12691-7, V.T.C.S. and Section 101.022, Human Resources Code, as amended.
8. **Senior Texans Employment Program.** From funds appropriated above, the Department on Aging will provide funds for the Senior Texans Employment Program in each year of the biennium in an amount not less than that provided in the year ending on August 31, 1991.
9. **Funding of Meals for the Elderly.** In expending the funds appropriated by this act, the Department on Aging will take no action that results in reducing the percentage of total funds allocated to meals programs below the percentage of total funds allocated to meals in the year ending August 31, 1993, unless necessary to maximize federal funds or to approve a locally-proposed area plan.
10. **Area Agencies on Aging.** Funds appropriated to the Department on Aging may not be used to alter local planning and service areas in effect on September 1, 1992 or to dedesignate, except in instances of substantial nonperformance, local Area Agencies on Aging previously established in accordance with the Older Americans Act of 1965, as amended, 42 U.S.C. 3001 et. seq., and the rules of the department implementing the act.

COMMISSION ON ALCOHOL AND DRUG ABUSE

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: TCADA P & T SERVICES		
To effect a fundamental change in attitudes and behavior concerning the use of alcohol and other drugs and problem gambling through prevention, education and treatment in order to decrease the need for agency services in the future.		
A.1. Objective:		
Reduce consequences, incidence and prevalence of chemical dependency		
Outcomes:		
Percent Reduction in Use of Alcohol, Drugs, Inhalants	5%	5%
Percent of Youth Completing Treatment Programs Who are Abstinent 60 Days After Discharge	79%	79%
Percent of Adults Completing Treatment Programs Who are Abstinent 60 Days After Discharge	81%	81%
Percent of Youth Receiving a Continuum of Community Based Treatment Services Two or More Times	29%	29%
Percent of Adults Receiving a Continuum of Community Based Treatment Services Two or More Times	51%	51%
A.1.1. Strategy: CHEM DEP PREVENTION SRVCS		
Design, develop, and implement innovative and culturally relevant chemical dependency prevention services and activities.		
	\$ 32,693,720	\$ 32,693,720
Outputs:		
Number of Adults Served in Prevention Programs	922,109	982,002
Number of Youth Served in Prevention Programs	1,503,916	1,514,057
A.1.2. Strategy: CHEM DEP TREATMENT SRVCS		
Provide chemical dependency treatment services.		
	\$ 97,408,451	\$ 97,403,852
Outputs:		
Percent of Adults Completing Treatment Programs	42%	42%
Percent of Youth Completing Treatment Programs	26%	26%
Efficiencies:		
Average Cost per Adult Completing Treatment Programs	2,014	2,014
Average Cost per Youth Completing Treatment Programs	11,105	11,105
Total, Objective A.1: Reduce consequences, incidence and prevalence of chemical dependency		
	\$ 130,102,171	\$ 130,097,572
A.2. Objective:		
Incr awareness/establish baseline re incidence/prevalence of prob gamb		
Outcomes:		
Establish Prevalence of Problem Gambling	100	
A.2.1. Strategy: COMP GAMB PREVENTION SRVC		
Conduct problem gambling awareness and prevention services and activities.		
	\$ 622,266	\$ 622,266
Outputs:		
Number of Persons in Gambling Prevention Programs	324,360	394,159
Efficiencies:		
Average Cost per Person Served in Gambling Prevention Programs	1.92	1.58

COMMISSION ON ALCOHOL AND DRUG ABUSE
(Continued)

A.2.2. Strategy: COMP GAMB TREATMENT SRVCS
Provide problem gambling treatment services.

\$ 1,468,155 \$ 1,468,155

Outputs:

Percent of Persons Completing Problem Gambling Treatment Programs

42% 42%

Efficiencies:

Average Cost per Person Completing Problem Gambling Treatment Programs

1.225 1.225

Total, Objective A.2: Incr awareness/establish baseline re incidence/prevalence of prob gamb

\$ 2,090,421 \$ 2,090,421

Total, Goal A: TCADA P & T SERVICES

\$ 132,192,592 \$ 132,187,993

B. Goal: TCADA ADMINISTRATION

To provide proactive leadership in resource development, planning, delivery, evaluation and regulation of chemical dependency and abuse and problem gambling services while carrying out TCADA's mandate to coordinate and ensure accountability, for such services through policy research, auditing and monitoring of funds in cooperation with other state and federal agencies.

B.1. Objective:

Implement/enhance an admin system for TCADAs prev/treat services

Outcomes:

Percent of Prevention and Treatment Programs in Compliance With State and Federal Mandates

98% 98%

Percent Reduction in Unmet Need

11.44% 11.44%

Percentage Increase in Number of People Receiving Chemical Dependency Treatment

25.35% 25.35%

B.1.1. Strategy: REGULATORY RESPONSIBILITY

Implement and maintain a regulatory system including licensing chemical dependency facilities and counselors to ensure that prevention and treatment services are of high quality, in compliance with state and federal mandates, and targeted toward people with the greatest unmet need.

\$ 2,502,565 \$ 2,502,565

Outputs:

Number of Treatment Facilities Inspected Each Year for Compliance

155 165

Complaints Resolved as a Percent of Complaints Received

75.17 74

Number of Counselors Licensed

6.000 6.000

Efficiencies:

Average Licensing Cost for Facility License

4.285 4.285

Average Licensing Cost for Individual License

95 95

B.1.2. Strategy: RESEARCH/MONITORING/COMPL

Conduct and apply policy research, plan and evaluate services provided to those most in need, enhance the level of federal funding and maintain accountability, compliance and effective stewardship of state and federal funds, including monitoring and auditing award recipients.

\$ 2,919,023 \$ 2,919,023

Outputs:

Total Number of Grants and Contracts Awarded

573 566

Number of Awards on Which Suspension or Termination was Initiated

16 16

COMMISSION ON ALCOHOL AND DRUG ABUSE
(Continued)

Efficiencies:		
Average Cost per Audit	1.527	1.527
Total, Objective B.1: Implement/enhance an admin system for TCADAs prev/treat services	\$ 5,421,588	\$ 5,421,588
Total, Goal B: TCADA ADMINISTRATION	\$ 5,421,588	\$ 5,421,588
C. Goal: SEC 146, 1993 SALARY INC	\$ 196,452	\$
Grand Total, COMMISSION ON ALCOHOL AND DRUG ABUSE	\$ 137,810,632	\$ 137,609,581
Method of Financing:		
General Revenue Fund	\$ 27,384,422	\$ 27,339,116
Federal Alcoholism Fund No. 136, estimated	97,713,144	97,557,399
Licensed Chemical Dependency Fund No. 144	370,000	370,000
Alcohol and Drug Abuse Treatment Licensure Fund No. 487	250,000	250,000
Interagency Contracts	11,060,066	11,060,066
Earned Federal Funds, estimated	1,033,000	1,033,000
Total, Method of Financing	\$ 137,810,632	\$ 137,609,581
Schedule of Exempt Positions		
Executive Director	\$66,836	\$66,836
Administrative and Support Cost as a Percent of Expenditures	3.3%	3.3%
<p>1. Screening of Alcoholics and Drug Abusers Authorized. From funds appropriated above, the Texas Commission on Alcohol and Drug Abuse may grant, through contract, funds to support the screening of alcoholics and drug abusers prior to institutionalization in a state facility. The commission may furthermore develop new alternatives to the institutionalization of alcoholics and drug abusers through services provided by community mental health centers and alcohol and drug abuse providers.</p> <p>2. Data Collection Required. The Commission is required to collect billing, services, and client information from contractors on a monthly basis. Data shall be collected on the services provided to minority populations, including Native Americans. The commission also shall document the expenditure of funds for training of personnel, staff development, public information, and other services that cannot be measured by direct client outcome.</p> <p>3. Agreements With Native American Population Authorities. The Texas Commission on Alcohol and Drug Abuse shall enter into agreements with Native American population authorities for the provision of substance abuse programs aimed at dealing with the treatment of alcoholics and drug abusers among the Indian population.</p>		

COMMISSION ON ALCOHOL AND DRUG ABUSE (Continued)

4. **Priority Populations Defined.** The Legislature designates the following priority populations of the commission.
 - youth who currently abuse, have abused, or at risk of abusing substances including youth in or referred by the juvenile justice system;
 - people who have or are at risk of having human immunodeficiency virus infection through substance abusing behavior;
 - substance abusers who have now, or who have at one time, entered the criminal justice system;
 - substance abusers who are at risk of institutionalization or who currently are served in mental health facilities;
 - substance abusers who have had children placed under the conservatorship of the Department of Protective and Regulatory Services;
 - Youth at-risk of selling controlled substances; and
 - Women with children or women of child bearing years.
5. **Appropriation of Glue and Paint Sales Permit Fees.** Funds appropriated above in A.1.1, Chemical Dependency Prevention Services, include \$258,498 in each fiscal year of the biennium from Glue and Paint Sales Permit Fees collected under the authority of Article 4476-15(d), Regulation of Sale of an Abusable Glue and Aerosol Paint, by the Texas Department of Health and transferred to the commission, to carry out the provisions of the above statute. Any balances remaining as of August 31, 1994, are reappropriated for the same purposes for the fiscal year beginning September 1, 1994.
6. **Appropriation of Simulcast Pari-mutuel Pool Fees.** Funds appropriated above in A.2.1, Compulsive Gambling Prevention Services, include \$59,451 in fiscal year 1994 and \$55,501 in fiscal year 1995 from Simulcast Pari-mutuel Pool Fees collected for the purposes specified in Article 179e, Section 6.091(a)(2), to carry out the provisions of the above statute. Any balances remaining as of August 31, 1994, are reappropriated for the same purposes for the fiscal year beginning September 1, 1994.
7. **Contingency Appropriation - Adult Singly Diagnosed Substance Abusers.** Contingent upon enactment of Senate Bill 834, 73rd Legislature, Regular Session, or similar legislation that eliminates the statutory requirement for the Department of Mental Health and Mental Retardation to receive adults committed for substance abuse on a voluntary or involuntary basis, there is included above in Strategy A.1.2, Chemical Dependency Treatment Services, \$7,600,000 in each fiscal year of the biennium. In the event that such legislation is not enacted, the sums above are instead appropriated to the Department of Mental Health and Mental Retardation. The Department of Mental Health and Mental Retardation shall enter into an interagency contract with the Commission on Alcohol and Drug Abuse for the purpose of providing substance abuse treatment services for adult singly diagnosed substance abusers.
8. **Grant Allocation.** It is the intent of the legislature that should a reduction in Mental Health Mental Retardation funding for singly diagnosed substance abuse clients result in a significant reduction or the elimination of substance abuse services in communities that were previously served by the Mental Health Mental Retardation substance abuse funds, the Texas

COMMISSION ON ALCOHOL AND DRUG ABUSE
(Continued)

Commission on Alcohol and Drug Abuse will give preference to such communities in the allocation of substance abuse grants for singly diagnosed individuals.

9. **Youth At-Risk for Selling Controlled Substances.** Out of funds appropriated above, the commission shall plan, develop, coordinate, evaluate, and implement constructive methods and programs to provide wholesome alternatives for youth at-risk of selling controlled substances.
10. **Coordination of Support Services.** Out of the funds appropriated above, the commission is directed to enter into formal agreements with other health and human service agencies to facilitate referral and access for its clients to other needed ancillary services as determined by the client's treatment plan. Each client's treatment plan is to contain complete and appropriate medical, educational and/or vocational objectives that meet the needs of clients. The commission shall provide technical aids and assistance to ensure that clients are provided or are referred to appropriate services. The commission shall monitor its contractors to gauge the performance of its contractors regarding the provision and/or referral of clients to appropriate services. The commission shall evaluate the impact that supportive services may have upon achieving successful treatment outcomes and report its findings to the 74th Legislature.
11. **Federal Funds.** Included in the funds above for strategy A.1.2., Chemical Dependency Treatment Services, are \$6.5 million for each fiscal year for the Treatment Alternatives to Incarceration Program, consisting of \$3.5 million of general revenue funds and \$3.0 million of federal funds from substance abuse treatment in criminal justice system grants. In the event that the State receives federal funds for criminal justice related substance abuse treatment, the commission shall notify the Legislative Budget Board and the Comptroller of Public Accounts within 30 days of federal notification of such an award. If the commission does not realize the full \$3.0 million in such federal funds, there is hereby appropriated to the Commission on Alcohol and Drug Abuse, sufficient general revenue to supplement the federal funds in an amount not to exceed \$3.0 million in each fiscal year of the biennium, to ensure that the Treatment Alternatives to Incarceration Program receives a total of \$6.5 million in each fiscal year of the biennium.

COMMISSION FOR THE BLIND

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: INDEPENDENT LIVING		
To assist Texans who are blind or visually impaired to live as independently as possible consistent with their capabilities.		
A.1. Objective:		
Increase the number of consumers achieving independent living goals		
Outcomes:		
Percent of Consumers Avoiding a Dependent Living Environment		
Who are at Risk	93%	93%

COMMISSION FOR THE BLIND
(Continued)

A.1.1. Strategy: INDEPENDENT LIVING SKILLS		
To provide a statewide program of developing independent living skills		
	\$ 3,695,823	\$ 3,439,224
Outputs:		
Number of Adults Receiving Skills Training	3,079	3,184
A.2. Objective:		
Increase the number of children who achieve their habilitative goals		
A.2.1. Strategy: HABILITATIVE SERVICES		
To provide habilitative services to blind and visually impaired children.		
	\$ 2,761,465	\$ 2,869,277
Outputs:		
Number of Children Receiving Habilitative Services	8,988	9,266
Total, Goal A: INDEPENDENT LIVING	<u>\$ 6,457,288</u>	<u>\$ 6,308,501</u>
B. Goal: MAINTAIN EMPLOYMENT		
To assist Texans who are blind or visually impaired to secure or maintain employment in careers consistent with their skills, abilities, and interests.		
B.1. Objective:		
Increase the number of successfully employed consumers		
Outcomes:		
Percent of Consumers Successfully Rehabilitated With Improved Economic Self-Sufficiency	86.5%	86.5%
Percent of Transition Consumers Successfully Completing Their Transition Program and Entering College, Technical Training, or Work	81%	81%
Average Earnings per Consumer Employed	27,980	28,235
B.1.1. Strategy: VOCATIONAL REHABILITATION		
To provide vocational rehabilitation services to persons who are blind or visually impaired.		
	\$ 28,351,959	\$ 28,259,959
Outputs:		
Number of Consumers Served	12,888	12,831
B.1.2. Strategy: TRANSITION SERVICES		
To provide Transition Program services leading to successful transition from school to work.		
	\$ 1,611,082	\$ 1,781,861
Outputs:		
Number of Students Successfully Completing the Transition Program	72	73
B.1.3. Strategy: EMPLOYMENT OPPORTUNITIES		
To provide employment opportunities in the food service industry for persons who are blind and visually impaired.		
	\$ 1,920,220	\$ 1,957,120
Outputs:		
Number of Consumers Employed	140	145
Total, Objective B.1: Increase the number of successfully employed consumers	<u>\$ 31,883,261</u>	<u>\$ 31,998,940</u>
Total, Goal B: MAINTAIN EMPLOYMENT	<u>\$ 31,883,261</u>	<u>\$ 31,998,940</u>
C. Goal: SEC 146, 1993 SALARY INC		
Section 146, 1993 Salary Increase		
	<u>\$ 720,302</u>	<u>\$</u>
Grand Total, COMMISSION FOR THE BLIND	<u>\$ 39,060,851</u>	<u>\$ 38,307,441</u>

COMMISSION FOR THE BLIND
(Continued)

Method of Financing:

General Revenue Fund	\$ 7,497,203	\$ 7,497,702
Federal Adult Blind Fund No. 141, estimated	29,652,204	28,877,517
Business Enterprise Program Fund No. 492	1,469,971	1,490,749
Blind Commission Endowment Fund No. 493	86,473	86,473
Interagency Contracts	48,000	48,000
Earned Federal Funds	<u>307,000</u>	<u>307,000</u>

Total, Method of Financing

\$ 39,060,851	\$ 38,307,441
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Schedule of Exempt Positions

Executive Director	\$65,166	\$65,166
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Bond Debt Service	\$ 240,685	\$ 241,665
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Administrative and Support Cost as a Percent of Expenditures	7.0%	7.2%
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1. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

	<u>1994</u>	<u>1995</u>
a. Acquisition or Lease Purchase of Information Resource Technologies	\$ 262,594	155,683
b. Purchase or Lease Purchase of Capital Equipment and Items	<u>685,000</u>	<u>685,000</u>
Total, Capital Budget	\$ 947,594	\$ 840,683
Method of Financing (Capital Budget):		
Federal Funds	\$ 512,594	\$ 405,683
Business Enterprise Program Fund	<u>435,000</u>	<u>435,000</u>
Total, Method of Financing (Capital Budget)	\$ 947,594	\$ 840,683

2. **Federal Adult Blind Fund.** All federal funds available in the Federal Adult Blind Fund No. 141, are hereby appropriated.
3. **Central Supply Revolving Fund.** The Commission for the Blind may, under such rules and regulations as deemed necessary, maintain and operate on a reimbursable basis a Central Supply Revolving Fund in order to contribute to the efficiency and economy of the Commission under its control and management. The Central Supply Revolving Fund may be established and operated from funds appropriated to the Commission in such amounts as shall be necessary. All receipts deposited to this Fund are appropriated for the purchase of necessary operating supplies and materials for the biennium ending August 31, 1995. To reimburse the funds from which expenditures are made, the Commission may make fund

COMMISSION FOR THE BLIND
(Continued)

transfers from the appropriations which receive the supplies, or may submit purchase vouchers through the office of the State Comptroller.

4. **Endowment Fund.** There is hereby appropriated to the Commission for the Blind, for the biennium beginning September 1, 1993, any balance on hand in the Endowment Fund as of August 31, 1993, and any revenue and receipts deposited to the Endowment Fund. These funds are appropriated to provide necessary client services and to carry out the provisions of paragraph 91.0301 Human Resources Code.
5. **Business Enterprises Fund.** There is hereby appropriated to the Commission for the Blind, for the biennium beginning September 1, 1993, any balance on hand in the Business Enterprises Fund as of August 31, 1993, and any revenues and receipts deposited to the Business Enterprises Fund. These funds are appropriated to carry out the provisions of Chapter 94 of the Texas Human Resources Code.
6. **Employee Work Assignments.** Employees assigned to the Criss Cole Rehabilitation Center or to special project facilities operated by the agency may, to the extent required for the effective direct provision of services to clients, be excepted from usual state policies regarding working hours, working days and holidays. Insofar as possible, the work days and work hours of such employees shall be determined according to a system comparable to that used by other state-operated special schools, hospitals, institutions or other facilities providing residential services to eligible individuals. Houseparents, attendants or related staff at the Criss Cole Rehabilitation Center for the Blind may be allowed to receive room, board and laundry services, without charge, in return for performing other duties as assigned by the administrator of the Criss Cole Rehabilitation Center for the Blind.
7. **Reimbursement of Services.** In order to reimburse equitably the appropriation items hereinabove made from which expenditures are made for services to employees and guests of the Criss Cole Rehabilitation Center or other residential facilities operated by the Commission for the Blind, the Commission for the Blind shall establish such reimbursement rates and rules as might be necessary to assure reimbursement at rates not less than the rates of reimbursement required by institutions, agencies or offices under the jurisdiction of the Board of Health, Board of Mental Health and Mental Retardation and the Texas Youth Commission.
8. **Appropriation of Federal Medicaid Receipts.** The Commission for the Blind shall certify and/or transfer appropriated state funds to the Texas Medicaid Single State Agency so that federal financial participation can be claimed for Medicaid services. Such federal receipts are hereby appropriated to the commission to provide habilitative services to blind and visually impaired children.
9. **Fund Transfer.** The Texas Commission for the Deaf and Hearing Impaired and the Texas Commission for the Blind shall develop an interagency contract for the provision of administrative services to the TCDHI by TCB. General revenue funds in the amount of \$50,000 in FY 1994 and \$50,000 in FY 1995 shall be transferred from the TCDHI to TCB in accordance with the interagency contract.

CANCER COUNCIL

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: CANCER SERVICES AND INFO		
To ensure that all Texans have prompt access to quality cancer prevention, screening, diagnosis, treatment, and rehabilitation information and services in order to increase the number of Texans surviving or never developing cancer		
A.1. Objective:		
Fund and promote cancer prevention, screening, diagnosis and treatment		
Outcomes:		
Percent of Counties Served Through Council Activities.	49%	50%
A.1.1. Strategy: PLANNING CANCER SERVICES		
Mobilize and support collaborative and effective strategic planning of cancer-related programs, services, and policies among the public, private, and volunteer sectors through contracts or direct intervention		
	\$ 1,755,255	\$ 1,755,255
Outputs:		
Number of Statewide, Regional, and Local Strategic Planning Initiatives Promoted by Direct Council Intervention or Contracts.	20	21
Number of Reports on Cancer Resources, Policies, and Statistics Produced.	39	44
A.1.2. Strategy: ENHANCING CANCER SERVICES		
Enhance the quality and/or availability of cancer prevention education, screening, diagnosis, treatment, and rehabilitation information and services through contracts or direct intervention		
	\$ 2,466,648	\$ 2,466,648
Outputs:		
Number of People Directly Served by Council-Funded Cancer Prevention and Control Activities.	7,500	7,500
Number of Health Care and/or Education Professionals Who Receive Council-Funded Training or Materials.	33,000	36,300
Total, Objective A.1: Fund and promote cancer prevention, screening, diagnosis and treatment	<u>\$ 4,221,903</u>	<u>\$ 4,221,903</u>
Total, Goal A: CANCER SERVICES AND INFO	<u>\$ 4,221,903</u>	<u>\$ 4,221,903</u>
B. Goal: SEC 146, 1993 SALARY INC		
Section 146, 1993 Salary Increase	\$ 9,364	
Grand Total, CANCER COUNCIL	<u>\$ 4,231,267</u>	<u>\$ 4,221,903</u>
Method of Financing:		
General Revenue Fund	\$ 4,120,444	\$ 4,111,080
Interagency Contracts	<u>110,823</u>	<u>110,823</u>
Total, Method of Financing	<u>\$ 4,231,267</u>	<u>\$ 4,221,903</u>

CANCER COUNCIL (Continued)

Schedule of Exempt Positions Executive Director

\$57,691 \$57,691

Bond Debt Service \$ 36,589 \$ 36,486

1. **Unexpended Balances.** Any unexpended balances in the appropriations for the fiscal year ending August 31, 1994, may be carried forward into fiscal year 1995 and such balances are hereby appropriated.

CHILDREN'S TRUST FUND OF TEXAS COUNCIL

For the Years Ending	
August 31, 1994	August 31, 1995

A. Goal: CHILD ABUSE PREVENTION

To promote and provide opportunities so that Texas children can grow to responsible and productive adulthood, free of threats to their dignity, physical safety, and emotional well-being

A.1. Objective:

Increase counties with programs to prevent child abuse & neglect

Outcomes:

Number of Texas Counties Where CTF-Funded Programs Provide Child Abuse and Neglect Prevention Services

125 125

A.1.1. Strategy: GRANTS & TECH ASSISTANCE

Provide state grants, leverage non-state funds and provide technical assistance to community level child abuse prevention programs

\$ 1,505,712 \$ 1,510,369

Outputs:

Number of Children Reached by CTF Prevention Activities

69,750 70,300

Efficiencies:

Average Cost Per Participant in CTF-Funded Programs

48 48

A.2. Objective:

Increase # parents/professionals receiving child abuse materials

Outcomes:

Percent Increase in the Number of Parents Provided CTF Educational Materials and Resources

15% 15%

A.2.1. Strategy: CA&N MATERIALS & TRAINING

Provide a variety of educational materials (printed and audiovisual), training opportunities, and other child abuse and neglect prevention activities for selected geographic regions, target populations, and the general public

\$ 368,528 \$ 386,954

Outputs:

Number of Citizens Receiving Child Abuse Prevention Information and Materials

12,500 15,000

Total, Goal A: CHILD ABUSE PREVENTION

\$ 1,874,240 \$ 1,897,323

CHILDREN'S TRUST FUND OF TEXAS COUNCIL
(Continued)

B. Goal: SEC 146, 1993 SALARY INC
Section 146, 1993 Salary Increase

\$ 5,109 \$

**Grand Total, CHILDREN'S TRUST FUND OF
TEXAS COUNCIL**

\$ 1,879,349 \$ 1,897,323

Method of Financing:

Children's Trust Fund of Texas Council Operating Fund
No. 541

\$ 1,448,866 \$ 1,445,315

Federal Funds, estimated

410,270 430,785

Appropriated Receipts, estimated

20,213 21,223

Total, Method of Financing

\$ 1,879,349 \$ 1,897,323

Schedule of Exempt Positions

Executive Director

\$51,029 \$51,029

Administrative and Support Cost as a Percent of Expenditures 13.2% 13.2%

1. **Gifts, Grants and Donations.** The council may solicit gifts, grants and donations from private and public sources, and such funds are hereby appropriated to the council.

COMMISSION FOR THE DEAF AND HEARING IMPAIRED

For the Years Ending
August 31, August 31,
1994 1995

A. Goal: SERVICES TO INDIVIDUALS

To promote and regulate an effective system of services to individuals who are deaf or hearing impaired

A.1. Objective:

Increase the availability of specialized & existing services to client

Outcomes:

Percent Increase in the Number of Services Accessible to People
Who are Deaf or Hearing Impaired

0%

0%

A.1.1. Strategy: CONTRACT SERVICES

Contract for services for persons who are deaf or hearing impaired to include services or training in: communication facilitation, coping skills, job readiness, nutrition, reading, parenting, leadership, assistive listening devices, early intervention, and prevention of hearing loss.

\$ 560,559 \$ 560,559

Outputs:

Number of Hours of Interpreter Services Provided

9,730

9,730

COMMISSION FOR THE DEAF AND HEARING IMPAIRED
(Continued)

2. **Community-based Interpreter Services.** Any fees collected by local community-based organizations for interpreter services are hereby appropriated and shall be used solely for the purpose of providing additional hours of interpreter services to eligible individuals who are deaf or hearing impaired.
3. **Solicitation of Grants, Gifts, and Donations.** The Texas Commission for the Deaf and Hearing Impaired is authorized to develop plans and programs to solicit and may solicit gifts, grants, and donations from private and public sources to be expended for the purposes specified by the donor provided that such strategies are consistent with Chapter 81 of the Human Resources Code and such gifts, grants, and donations are hereby appropriated to the commission. Any balance of gifts, grants, or donation amounts unexpended for fiscal year 1994 shall be available for expenditure in fiscal year 1995.
4. **Expansion of Services.** All funds received as reimbursement for services rendered by the Commission shall be used to expand the services of the strategy from which the fees were paid within the fiscal year in which the reimbursement is received.
5. **Fund Transfer.** The Texas Commission for the Deaf and Hearing Impaired and the Texas Commission for the Blind shall develop an interagency contract for the provision of administrative services to the TCDHI by TCB. General revenue funds in the amount of \$50,000 in FY 1994 and \$50,000 in FY 1995 shall be transferred from the TCDHI to TCB in accordance with the interagency contract.
6. **Contract Services.** The Commission is directed to utilize the administrative funds remaining in the agency during FY 94-95 as a result of the transfer of administrative activities to the Commission for the Blind, in the area of Contract Services, Strategy A.1.1. Hence, the agency is directed to spend from the funds appropriated above, \$75,000 per fiscal year in the area of Contract Services.
7. **Contingency Appropriation for Senate Bill 1117.** Contingent upon the enactment of Senate Bill 1117, Seventy-third Legislature, Regular Session, or similar legislation, the Commission for the Deaf and Hearing Impaired is hereby appropriated, from the General Revenue Fund, an amount not to exceed \$46,090 for fiscal year 1994 and \$46,090 for fiscal year 1995 for the purpose of implementing the provisions of that Act. The Commission for the Deaf and Hearing Impaired is hereby authorized to transfer the appropriations made pursuant to this provision to the appropriate strategies listed above.

INTERAGENCY COUNCIL ON EARLY CHILDHOOD INTERVENTION

	For the Years Ending	
	August 31, 1994	August 31, 1995

A. Goal: YOUTH AT RISK OF DELAY

To ensure that all children in Texas who are below the age of three with developmental needs or are at risk of developmental delay receive comprehensive services that are family-focused and community-based

A.1. Objective:

Ensure family awareness of ECI program & provide ECI services to youth

Outcomes:

Percent of the Targeted Eligible Population Identified and Offered Early Intervention Services

35%

35%

Percent of the Targeted Eligible Population Enrolled

66%

70%

A.1.1. Strategy: ECI ELIGIBILITY AWARENESS

Conduct a statewide public awareness and childfind component in accordance with the federal regulations to ensure that families of eligible infants and toddlers who are identified and advised of the importance of early intervention and how to access services

\$	474,887	\$	480,052
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Outputs:

Number of Referrals Made to Local Programs Through Coordination of Case Management Services With Other Agencies

15,500

16,500

A.1.2. Strategy: STATEWIDE HPITS PROGRAMS

Establish for high priority infants on a statewide basis transitional service programs

\$	1,540,220	\$	1,939,500
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Outputs:

Number of Children Served in HPITS

2,751

3,359

Efficiencies:

Cost per Child Tracked Through the High Priority Infant Transitional Services (HPITS)

506

536

A.1.3. Strategy: COORDINATION OF RESOURCE

Administer and supervise a statewide system of services through the coordination of federal, state, and community resources

\$	35,381,444	\$	39,282,694
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Outputs:

Number of Children Served Through Intervention Services

15,012

15,512

Efficiencies:

Cost per Child Served Through Intervention Services

5,904

6,258

A.1.4. Strategy: ENSURE QUALITY SERVICES

Ensure the quality of services through a system of training and technical assistance, personnel standards, program evaluation, and procedural safeguards

\$	736,062	\$	949,893
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Outputs:

Number of Training and Technical Assistance Events Provided

165

210

Total, Objective A.1: Ensure family awareness of ECI program & provide ECI services to youth

\$	38,132,613	\$	42,652,139
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Total, Goal A: YOUTH AT RISK OF DELAY

\$	38,132,613	\$	42,652,139
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INTERAGENCY COUNCIL ON EARLY CHILDHOOD INTERVENTION (Continued)

B. Goal: SEC 146, 1993 SALARY INC
Section 146, 1993 Salary Increase

\$ 11,741 \$

**Grand Total, INTERAGENCY COUNCIL ON
EARLY CHILDHOOD INTERVENTION**

\$ 38,144,354 \$ 42,652,139

Method of Financing:

General Revenue Fund

\$ 19,196,676 \$ 19,184,935

Federal Funds, estimated

18,947,678 23,467,204

Total, Method of Financing

\$ 38,144,354 \$ 42,652,139

Schedule of Exempt Positions

Executive Director

\$54,234

\$54,234

Administrative and Support Cost as a Percent of Expenditures

2.3%

2.1%

1. **Authority of Final Jurisdiction.** The Interagency Council on Early Childhood Intervention shall have the final authority for the obligation and expenditure of the funds herein appropriated and shall be held responsible for compliance with all laws and regulations applicable to the disposition of said funds. The state auditor shall conduct a separate examination of the activities of the Interagency Council on Early Childhood Intervention for purposes of determining compliance with applicable statutes and regulations.

DEPARTMENT OF HEALTH

For the Years Ending
August 31, August 31,
1994 1995

A. Goal: PREVENTION & PROMOTION

Assure that prevention and health promotion are integral parts of all services. Maximize the use of primary prevention, as well as early detection and management of care, in providing public health services. Promote individual and community commitment to the importance of good personal and environmental health

A.1. Objective:

Intervene in consumer, environmental, occupational & community hazards

Outcomes:

Change in Percentage of Inspected Entities in Noncompliance
With Statutes and/or Rules

-11.3%

-10.75%

Changed Rate of Reported Zoonotic Diseases

-.75%

-.5%

DEPARTMENT OF HEALTH
(Continued)

A.1.1. Strategy: BORDER HEALTH & COLONIAS

Develop and implement a program to reduce consumer, environmental, occupational and community health hazards along the Texas/Mexico border and in the "colonias"

\$ 162,191 \$ 162,191

Outputs:

Number of Citizen/Community Activities Implemented

824 824

A.1.2. Strategy: FOOD-DRUG PRODUCT SAFETY

Implement uniform safety programs for foods, drugs, medical devices and consumer products

\$ 7,601,515 \$ 7,601,466

Outputs:

Number of Surveillance Activities Conducted

798,396 798,396

A.1.3. Strategy: RADIATION CONTROL

Develop and implement a comprehensive regulatory program for all sources of radiation

\$ 6,575,852 \$ 6,419,434

Outputs:

Number of Licenses/Registrations Issued

10,311 10,361

A.1.4. Strategy: MEAT PRODUCT INSPECTION

Enforce applicable regulations and rules relative to wholesomeness of meat products

\$ 7,136,867 \$ 7,136,867

Outputs:

Number of Consultations Provided

164,727 164,727

A.1.5. Strategy: ZOO NOTIC DISEASES CONTROL

Enhance programs to reduce the level of zoonotic diseases

\$ 1,135,165 \$ 1,135,165

Outputs:

Number of Surveillance Activities Conducted

70,500 71,000

A.1.6. Strategy: OCCUPATION/WORKER HEALTH

Enhance existing occupational health hazard control programs, and enforcement of statutes including increasing occupational health program activities related to migrant worker health

\$ 2,310,961 \$ 2,310,910

Outputs:

Number of Surveillance Activities Conducted

2,500 2,500

A.1.7. Strategy: COMMUNITY SANITATION

Enforce applicable community sanitation laws and regulations in conjunction with the design and implementation of an education and promotion component for all community health protection programs

\$ 1,330,016 \$ 1,329,989

Outputs:

Number of Enforcement Actions Taken

5,100 5,100

Total, Objective A.1: Intervene in consumer, environmental, occupational & community hazards

\$ 26,252,567 \$ 26,096,022

A.2. Objective:

Increase statewide WIC-eligible participants

Outcomes:

Change in the Incidence of Low Birth Weight Babies Born to Women, Infants and Children's Nutrition (WIC) Program Mothers

-10% -10%

DEPARTMENT OF HEALTH
(Continued)

A.2.1. Strategy: PROVIDE FOOD PACKAGES

Provide nutritious food supplement packages to eligible participants in an effective, cost-efficient, user friendly manner

\$ 360,386,887 \$ 409,736,058

Outputs:

Number of Pregnant Women, Infants and Children Provided Nutritious Food Supplements

707,300 850,400

Efficiencies:

Average Food Cost per Person Receiving Services

28 28

A.2.2. Strategy: NUTRITION REFERRAL SYSTEM

Support a referral system for nutrition programs and health care programs

\$ 532,129 \$ 603,472

Outputs:

Number of Referrals by Local Agency, County, and Participant Type per Year to Texas Department of Health Nutrition Programs

970,000 1,160,000

Number of WIC Participants Served in the Farmer's Market Program

Total, Objective A.2: Increase statewide WIC-eligible participants

\$ 360,919,016 \$ 410,339,530

A.3. Objective:

Increase comp public health nutrition education in public health clinics

Outcomes:

Change in Percentage of Public Health Clinic Consumers Receiving Nutrition Education

-15% -15%

A.3.1. Strategy: AUGMENT NUTRITION EDUC

Augment nutrition education programs with staff, lessons, audiovisuals and self-paced learning modules to meet the need for intervention with normal and high risk participants while developing continual outreach initiatives

\$ 16,205,057 \$ 18,427,720

Outputs:

Number of Maternal and Child Health (M&CH) Participants Provided Nutrition Education and Counseling Services Annually

1,100 1,100

Number of WIC Participants Provided Nutrition, Education, and Counseling Services Annually

7,944,000 9,540,000

A.3.2. Strategy: TRAIN PROFS ON NUTRITION

Develop ongoing initiatives in each public health region to train and update public health professionals about nutrition and its relationship to chronic disease prevention, diabetes, wellness, pregnancy and family planning, infancy and breastfeeding, children and adolescents health and the aging process

\$ 278,136 \$ 278,136

Outputs:

Number of Hours of Technical Assistance Provided

2,150 2,150

Total, Objective A.3: Increase comp public health nutrition education in public health clinics

\$ 16,483,193 \$ 18,705,856

A.4. Objective:

Decrease level of preventable diseases, injuries & conditions & deaths

DEPARTMENT OF HEALTH (Continued)

Outcomes:

Change in the Incidence Rate of Preventable Disease Morbidity and Mortality, Related Conditions, and Injuries

-29.9%

-29.9%

Change in Post-Diagnosis Life Span of Two Years or Greater in HIV- Infected Persons

0%

0%

A.4.1. Strategy: CONTROL CHRONIC DISEASES *

Assist public health regions and local health departments to provide chronic disease control activities and further integrate them into their public health services

\$ 9,813,562 \$ 9,813,457

Outputs:

Number of Chronic Disease Risk Assessments Conducted

40,000

40,000

Number of Chronic Disease Screenings Provided

121,000

121,750

A.4.2. Strategy: HIV SERVICES & EDUCATION

Diagnose and link Human Immunodeficiency Virus (HIV) positive consumers to medical and social service providers for early intervention and to provide HIV education to prevent the spread of infection

\$ 36,426,493 \$ 36,426,493

Outputs:

Number of Persons Provided Social and Medical Services and Education After Diagnosis of HIV Infection

16,100

15,985

Number of Persons Served by the HIV Medication Program

4,567

4,492

A.4.3. Strategy: IMMUNIZATIONS, TB & STDs

Implement programs to immunize Texas residents, and actively identify and treat tuberculosis and other mycobacterial infections, and certain Sexually Transmitted Disease (STD) infections

\$ 68,504,114 \$ 67,673,114

Outputs:

Number of Doses of Specific Vaccines Administered by Age Group

4,649,000

4,649,000

Number of Active Tuberculosis Cases Provided Services

2,450

2,450

Number of Cases of Primary and Secondary Syphilis Provided Services

3,515

3,515

Efficiencies:

Average Cost per Dose of Vaccine Administered

8.63

8.97

A.4.4. Strategy: EPIDEMIOLOGY ACTIVITIES

Reduce the incidence of diseases and health conditions of public health importance through epidemiological activities

\$ 2,510,479 \$ 2,510,479

Outputs:

Number of Field Investigations Conducted

200

200

Number of Institutions Reporting Cancer Cases

410

410

A.4.5. Strategy: HEALTH PROMOTION PROGRAM

Develop and implement a comprehensive public health promotion program that supports all departmental activities and includes information dissemination, community based outreach efforts, risk reduction and disease prevention interventions

\$ 1,460,410 \$ 1,460,410

Outputs:

Number of Technical Assistance Sessions Conducted

9,600

9,600

A.4.6. Strategy: DENTAL HEALTH PROGRAM

Expand the dental health education program; increase the total percentage of the state population receiving optimally fluoridated water; increase the number of children receiving interceptive dental care; and develop a comprehensive access system for oral health services for long-term care residents

\$ 2,806,548 \$ 2,806,548

DEPARTMENT OF HEALTH
(Continued)

Outputs:

Population Provided Service Through Fluoridated Community Water Systems

180,000

180,000

Number of Children Provided Dental Health Education

650,000

650,000

A.4.7. Strategy: CHRONIC DISEASE SERVICES

Provide prompt service and/or referral of all eligible applicants for chronic disease services

\$ 15,582,050

\$ 15,207,050

Outputs:

Number of Consumers Provided Service

29,489

29,489

Total, Objective A.4: Decrease level of preventable diseases, injuries & conditions & deaths

\$ 137,103,656

\$ 135,897,551

Total, Goal A: PREVENTION & PROMOTION

\$ 540,758,432

\$ 591,038,959

B. Goal: MEDICAID SERVICES

Develop a comprehensive approach to client health care for the greatest number of eligible Texans which assists and encourages clients by increasing the range and scope of available services and by providing a broad and flexible array of service providers for all geographical locales of Texas

B.1. Objective:

Improve client access to increased range & scope of health care svcs

Outcomes:

Percent of Poverty and Other Low-Income Population Covered by Acute Care Services

43.9%

44.3%

Percent of Total Medicaid Eligible Prescribed Medications Provided by Vendor Drug Services

78.4%

78.8%

Percent of Eligible un-Reimbursed Indigent Hospital Care Paid by Disproportionate Share Funds

.94%

.94%

B.1.1. Strategy: PREMIUMS: AGED/MEDICARE

Provide accessible, premium-based health services to Medicaid-eligible aged and Medicare-related persons

\$ 256,850,196

\$ 273,316,100

Outputs:

Average Aged/Medicare Recipient Months per Month

279.536

290.301

Efficiencies:

Cost per Aged/Medicare Recipient Month

61.17

63.62

B.1.2. Strategy: PREMIUMS: DISABLED/BLIND

Provide accessible, premium-based health services to Medicaid-eligible disabled and blind persons

\$ 793,367,036

\$ 885,772,115

Outputs:

Average Disabled/Blind Recipient Months per Month

181.355

199.381

Efficiencies:

Cost per Disabled/Blind Recipient Month

355.75

390.81

B.1.3. Strategy: PREMIUMS: AFDC ADULTS

Provide accessible, premium-based health services to Medicaid-eligible AFDC-related adults

\$ 434,673,439

\$ 475,236,598

Outputs:

Average AFDC Adult Recipient Months per Month

258.394

276.748

Efficiencies:

Cost per AFDC Adult Recipient Month

133.5

144.6

B.1.4. Strategy: PREMIUMS: AFDC CHILDREN

Provide accessible, premium-based health services to Medicaid-eligible AFDC-related children

\$ 525,809,533

\$ 582,080,311

DEPARTMENT OF HEALTH
(Continued)

Outputs:

Average AFDC Children Recipient Months per Month	712,258	765,410
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Efficiencies:

Cost per AFDC Children Recipient Month	61.3	63.64
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B.1.5. Strategy: PREMIUMS: PREGNANT WOMEN

Provide accessible, premium-based health services to Medicaid-eligible pregnant women	\$ 488,608,463	\$ 569,643,252
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Outputs:

Average Pregnant Women Recipient Months per Month	85,222	95,817
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Efficiencies:

Cost per Pregnant Women Recipient Month	462.87	508.83
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B.1.6. Strategy: PREMIUMS: INFANTS

Provide accessible, premium-based health services to Medicaid-eligible infants	\$ 717,462,058	\$ 936,396,221
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Outputs:

Average Newborn Recipient Months per Month	130,081	160,380
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Efficiencies:

Cost per Newborn Recipient Month	459.79	525.16
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B.1.7. Strategy: PREMIUMS: CHILDREN

Provide accessible, premium-based health services to Medicaid-eligible children above AFDC income eligibility criteria	\$ 385,908,244	\$ 429,182,503
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Outputs:

Average Expansion Children Recipient Months per Month	345,112	364,046
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Average Federal Mandate Recipient Months per Month	142,923	177,891
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Efficiencies:

Cost per Expansion Children Recipient Month	76.89	82.59
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Average Federal Mandate Children Premium per Recipient Month	33.58	36.79
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B.1.8. Strategy: PREMIUMS: MEDICALLY NEEDY

Provide accessible, premium-based health services to Medicaid-eligible medically needy persons	\$ 73,569,550	\$ 72,977,646
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Outputs:

Average Medically Needy Recipient Months per Month	19,145	18,558
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Cost per Medically Needy Recipient Month	315.4	367.87
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B.1.9. Strategy: COST REIMBURSED SERVICES

Provide accessible, cost-reimbursed, health services to eligible persons meeting other Medicaid eligibility criteria	\$ 475,567,567	\$ 598,177,533
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Outputs:

SMIB Recipient Months per Month	307,552	337,194
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Part A Recipient Months per Month	36,242	43,510
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Number of Qualified Medicare Beneficiaries (QMBs)	33,639	38,914
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Number of un-Documented Aliens Served	2,971	3,950
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Number of Clients Receiving Extended Benefits Through EPSDT-CCP		
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Efficiencies:

Average SMIB Premium per Month	39.65	44.49
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Average Part A Premium per Month	255.58	286.56
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Average QMB Cost per Month	105.6	114.36
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Average un-Documented Alien Cost per Month	2,384	2,742
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B.1.10. Strategy: PRESCRIPTION MEDICATIONS

Provide prescription medication to Medicaid-eligible recipients as prescribed by the treating physician	\$ 539,167,896	\$ 633,454,223
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Outputs:

Annual Medicaid Prescriptions Incurred	19,916,503	21,672,104
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Prescriptions Incurred per Recipient	3.3	3.3
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DEPARTMENT OF HEALTH
(Continued)

Efficiencies:		
Average Cost per Prescription	26.06	28.12
B.1.11. Strategy: MEDICAL TRANSPORTATION		
Provide non-ambulance transportation for eligible Medicaid recipients to and from providers of Medicaid services	\$ 10,763,736	\$ 12,722,007
Outputs:		
Recipient One-Way Trips	861,056	951,844
B.1.12. Strategy: DISPROPORTIONATE SHARE		
Provide reimbursement to hospitals that provide a disproportionate share of health care services to low income patients in compliance with federal regulations.	\$ 19,582,773	\$ 19,156,640
Efficiencies:		
Proportion of Medicaid Participating Hospitals Receiving DSF	28	28
B.1.13. Strategy: COUNTY INDIGENT HEALTH		
Provide support activities to local governments that provide county indigent health care services, and reimbursement to counties that provide care in excess of 10 percent of their General Revenue Tax Levy	\$ 5,623,908	\$ 5,981,471
Outputs:		
Counties Receiving State Matching Funds	18	18
Total, Objective B.1: Improve client access to increased range & scope of health care svcs		
	\$ 4,726,954,399	\$ 5,494,096,620
B.2. Objective:		
Increase access to preventive, diagnostic and treatment services		
Outcomes:		
Percent of Eligible Population Screened	65.7%	74.4%
Average Time Between EPSDT Dental Services	6	6
Percent of Population Receiving Family Planning Service	22.1%	22.2%
B.2.1. Strategy: EPSDT MEDICAL SCREENS		
During 1993-1998 provide increased access to quality preventive and comprehensive diagnostic/treatment services for eligible clients by maximizing the use of primary prevention, early detection and management of health care	\$ 89,874,247	\$ 117,251,645
Outputs:		
Number of EPSDT Medical Screens Performed	1,269,016	1,646,242
Number of Medical Providers	1,358	1,589
Number of Persons Receiving Medical Screens	731,534	954,205
B.2.2. Strategy: EPSDT DENTAL CARE		
Provide a comprehensive and accessible system of EPSDT dental care for all Medicaid eligible children in accordance with all federal mandates	\$ 89,128,412	\$ 89,923,869
Outputs:		
Number of EPSDT Dental Treatments Performed	2,816,144	2,841,188
Number of EPSDT Dental Providers	1,674	1,707
Number of Clients Receiving Dental Treatments	480,457	482,266
Efficiencies:		
Cost per Treatment	31.45	31.45
B.2.3. Strategy: FAMILY PLANNING SERVICES		
Provide family planning services for all Medicaid eligibles and Title XX eligible clients, which includes persons whose family income is equal to or less than		

DEPARTMENT OF HEALTH
(Continued)

150 percent of the federal poverty level and those persons federally mandated by Title IV-A of the Social Security Act, but not covered by Medicaid

\$ 107,028,724 \$ 119,511,668

Outputs:

Number of Females Receiving Family Planning Services

497,737

499,187

Number of Males Receiving Family Planning Services

5,736

6,557

Total, Objective B.2: Increase access to preventive, diagnostic and treatment services

\$ 286,031,383 \$ 326,687,182

Total, Goal B: MEDICAID SERVICES

\$ 5,012,985,782 \$ 5,820,783,802

C. Goal: ASSURE QUALITY SERVICES

Assure availability of highest quality services to all Texans across the care continuum. Promote recruitment and retention of competent health care professionals. Remain flexible in responding to the public's needs and concerns

C.1. Objective:

Timely license, register, certify & permit health care professionals

Outcomes:

Change in Percentage of Licensed or Certified Professionals out of Compliance With State Regulations

0%

0%

C.1.1. Strategy: HEALTH CARE PROFESSIONALS

Implement program to ensure timely, accurate issuance of licenses, registrations, certifications, permits, and placing on a registry for health care professionals

\$ 6,639,212 \$ 6,639,212

Outputs:

Number of Health Care Professionals Licensed, Permitted, Certified, Placed on a Registry, or Registered

67,209

67,209

C.2. Objective:

Provide case manag't services to children w/special health care needs

Outcomes:

Change in Percentage of Chronically Ill and Disabled Children (CIDC), Supplemental Security Income (SSI) and CSHCN Recipients With a Case Manager

0%

0%

C.2.1. Strategy: CIDC PROVIDERS & NETWORKS

Recruit providers, and develop networks with public and private primary, secondary, tertiary, and allied health care providers to assist eligible consumers in receiving CIDC approved health services

\$ 37,995,060 \$ 37,995,039

Outputs:

Number of Recipients Receiving Services Paid for by the Program

35,000

35,000

Efficiencies:

Medical Cost per Case

1.000

1.000

C.3. Objective:

Respond to laboratory requests & complaints

Outcomes:

Percentage of Lab Service Requests Completed

100%

100%

DEPARTMENT OF HEALTH (Continued)

C.3.1. Strategy: OPERATE REFERENCE LAB

Operate a state-of-the-art reference laboratory to provide essential support to disease prevention and other TDH associateship programs in the isolation, identification, detection and verification of living and nonliving agents which cause disease and disabilities

Outputs:

Number of Relative Value Units Produced

Efficiencies:

Cost per Relative Value Unit

\$ 12,288,262 \$ 12,288,262

3,244,800

3,244,800

4.4

4.4

Total, Goal C: ASSURE QUALITY SERVICES

\$ 56,922,534 \$ 56,922,513

D. Goal: PROMOTE EQUITABLE ACCESS

Minimize disparities in health status among all population groups. Promote reduction in disease and conditions which disproportionately affect minority populations. Advocate for the people the department serves. Allocate public health resources in a rational and equitable manner. Promote equitable access to quality medical care whether through private providers, public clinics, and/or private-public cooperative ventures. Work to obtain the support and commitment of elected officials at all levels to maintain and enhance the public's health

D.1. Objective:

Increase M&CH services to eligible women, infants & children

Outcomes:

Change in Annual Infant Mortality Rate

-2.5%

-2.5%

Change in Percentage of Pregnancies to Single Teens

-2.6%

-2.7%

D.1.1. Strategy: PROVIDE M&CH SERVICES

Provide easily accessible maternal and child health services through women's health, genetic and child health services to all low income women, infants, children and adolescents

\$ 65,897,989 \$ 65,756,789

Outputs:

Number of Children Age 1-20 Provided Services

81,828

81,828

Number of Women Provided Services

138,951

138,951

Number of Infants Provided Services

108,142

108,142

D.1.2. Strategy: FAMILY PLANNING SERVICES

Increase family planning services throughout Texas for teens and adult women

\$ 8,270,171 \$ 8,270,171

Outputs:

Number of Family Planning Consumers Provided Services

258,150

258,150

Total, Objective D.1: Increase M&CH services to eligible women, infants & children

\$ 74,168,160 \$ 74,026,960

D.2. Objective:

Provide primary health care to eligible indigent families

Outcomes:

Percentage Change in Primary Health Care-Eligible Indigent

Patients With a Primary Health Care Provider

0%

0%

DEPARTMENT OF HEALTH
(Continued)

D.2.1. Strategy: COMMUNITY PRIMARY CARE

Establish 25 new community oriented primary care programs, continue support to existing clinics in medically underserved areas, and convert closed rural hospitals to essential access community hospital/ (Rural) primary care hospitals

\$ 10,767,552 \$ 10,767,552

Outputs:

Number of Primary Health care-Eligible Indigent Families
Provided a "Primary Health Care Provider"

100.000 100.000

D.2.2. Strategy: RESIDENT COMPENSATION

Provide stipends to Texas Medical Schools for medical residents who are completing residency training programs in specified primary care specialties

\$ 4,087,438 \$ 4,087,438

Outputs:

Percentage of primary care resident physician slots supported

33% 33%

Total, Objective D.2: Provide primary health care to eligible indigent families

\$ 14,854,990 \$ 14,854,990

D.3. Objective:

Improve availability of basic health care services in rural areas

Outcomes:

Change in the Ratio of Primary Care Providers to Total Population in Rural Counties

0% 0%

D.3.1. Strategy: RURAL HEALTH CARE ACCESS

Develop programs to alleviate the lack of access to preventive and primary health care in rural areas of Texas

\$ 1,440,871 \$ 1,440,871

Outputs:

Number of Rural Students Provided Loans for Health Professions Education

21 21

D.4. Objective:

Increase TDH ratio of federal discretionary & block grant funds

Outcomes:

Percentage Change in Federal Dollars

1% 3%

D.4.1. Strategy: PURSUE FEDERAL FUNDING

Develop a program to pursue federal funding opportunities and reimbursement

\$ 744,598 \$ 644,598

Outputs:

Number of New Federal Funding Initiatives Developed

30 35

D.5. Objective:

Reduce disparity in preventable diseases among racial/ethnic groups

Outcomes:

Change in the Incidence Rate of Reportable Diseases by Race/Ethnicity

0% 0%

D.5.1. Strategy: MINORITY HEALTH PROGRAMS

Develop and implement program policies that are sensitive to the health concerns of minority population groups

\$ 258,344 \$ 258,344

Outputs:

Number of Minority Health Initiatives Implemented

7 7

Total, Goal D: PROMOTE EQUITABLE ACCESS

\$ 91,466,963 \$ 91,225,763

DEPARTMENT OF HEALTH (Continued)

E. Goal: MANAGEMENT & VOLUNTEERISM

Provide effective management of diverse health programs. Provide an innovative, effective and efficient management structure that fosters leadership, respect and integrity throughout the department. Promote citizen advocacy and volunteerism as tools for development and delivery of public health services

E.1. Objective:

Increase volunteers providing input in health service delivery issues

Outcomes:

Percentage Change in Volunteer Hours/Resources Given to the Department

3%

3%

E.1.1. Strategy: CITIZEN INVOLVEMENT

Identify and involve public, private and community organizations and individuals in supporting public health and prevention services

\$

125,631

\$

125,631

Outputs:

Number of Presentations/Training Sessions Provided

49

53

F. Goal: COORDINATED HEALTH SYSTEM

Establish a coordinated, unified statewide system of public health. Provide for effective public health policy leadership in every area of the state. Be involved with other health, human services, and environmental agencies, the private sector and the public in the development of policy and delivery of services

F.1. Objective:

Develop info to support public health policy decisions at all levels

Outcomes:

Change in Information Available to Support Health Policy Development

10%

10%

Percentage Change in Individuals and Entities That Utilize Statistics Data for Planning and Evaluation

2%

2%

F.1.1. Strategy: VITAL STATISTICS SYSTEM

Provide for a cost-effective, timely and secure system for recording, certifying, and disseminating information on public health conditions relating to births, deaths, fetal deaths, marriages, and divorces occurring in this state

\$

3,695,894

\$

3,695,894

Outputs:

Number of Records Filed

745,000

745,000

Number of Birth/Death Records Matched

30,000

30,000

F.1.2. Strategy: ANALYZE HEALTH DATA

Collect, analyze and distribute data concerning health trends, status, and systems as tools for decision-making and policy-setting

\$

1,410,630

\$

1,410,630

Outputs:

Number of Requests for Statistics Completed

3,700

3,700

Total, Objective F.1: Develop info to support public health policy decisions at all levels

\$

5,106,524

\$

5,106,524

F.2. Objective:

PHR coordinate & integrate serves for trauma, TB & poison control

DEPARTMENT OF HEALTH
(Continued)

Outcomes:

Change in Percentage in Public Health Regions With Inpatient
Care Available for Texas Residents With Tuberculosis

50%

75%

Percentage Change in Preventable Death and Disability due to
Trauma

-1%

-1%

F.2.1. Strategy: MASTER PLAN-PHR SERVICES

Develop and implement a "master plan," including
appropriate training, to guide coordinated activities in
the regions

\$ 17,178,461 \$ 16,901,358

Outputs:

Number of Regional Master Plans Developed

8

8

F.2.2. Strategy: TB & CHEST HOSPITALS

Provide for more than one level of inpatient care for
tuberculosis and chronic respiratory disease patients,
not only at the two chest hospitals but also in each
region of the state, by contracting with one (or more)
facility in each public health region to provide
inpatient care to patients who cannot travel to San
Antonio or Harlingen

\$ 23,857,692 \$ 23,857,692

Outputs:

Number of Inpatient Days: San Antonio State Chest Hospital

27,423

27,423

Number of Inpatient Days: South Texas Hospital

23,725

23,725

Number of Outpatient Visits: San Antonio State Chest
Hospital

12,000

12,000

Number of Outpatient Visits: South Texas Hospital

24,650

24,650

Efficiencies:

Average Length of Stay: San Antonio State Chest Hospital

29

29

Average Length of Stay: South Texas Hospital

24

24

Average Cost per Patient Day: San Antonio State Chest
Hospital

339

337

Average Cost per Patient Day: South Texas Hospital

346

344

Average Cost of Outpatient Visit: San Antonio State Chest
Hospital

210

210

Average Cost of Outpatient Visit: South Texas Hospital

40

40

F.2.3. Strategy: TRAUMA & POISON NETWORKS

Develop regional trauma networks, poison prevention
information and response systems and perinatal
networks

\$ 1,043,910 \$ 1,043,910

Outputs:

Number of Regional Trauma Networks Developed

2

2

**Total, Objective F.2: PHR coordinate & integrate
services for trauma, TB & poison control**

\$ 42,080,063 \$ 41,802,960

Total, Goal F: COORDINATED HEALTH SYSTEM

\$ 47,186,587 \$ 46,909,484

G. Goal: SEC 146, 1993 SALARY INC

Section 146, 1993 Salary Increase

\$ 2,450,160

\$

Grand Total, DEPARTMENT OF HEALTH

\$ 5,751,896,089

\$ 6,607,006,152

DEPARTMENT OF HEALTH
(Continued)

Method of Financing:

General Revenue Fund	\$ 307,196,833	\$ 225,124,108
Texas Department of Health Fee Receipts Fund No. 750, estimated	6,418,776	6,262,358
Medical Assistance Payments from General Revenue	<u>1,681,400,858</u>	<u>2,102,654,810</u>
Total, General Revenue Fund and Fee Receipts	<u>\$ 1,995,016,467</u>	<u>\$ 2,334,041,276</u>

Other Fee Funds:

Vital Statistics Fund No. 019	2,163,830	2,163,830
Traffic Safety Fund No. 029	750,000	750,000
Sanitarians Registration and License Fund No. 033	10,828	10,828
Professional Counselors Licensing Fund No. 139	417,454	417,454
License Dietician Act Fund No. 498	89,385	89,385
Bureau of Emergency Management Fund No. 512	703,115	703,115
Speech-Language Pathology and Audiology Fund No. 515	139,156	139,156
Food, Drug, Device, and Cosmetic Salvage Fund No. 517	60,116	60,116
TDH Public Health Services Fee Fund No. 524	1,133,020	1,133,020
Narcotic Treatment Permitting Fee Fund No. 671	<u>96,651</u>	<u>96,651</u>

Total, Other Fee Funds, estimated	<u>\$ 5,563,555</u>	<u>\$ 5,563,555</u>
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Federal Funds, estimated	3,704,069,798	4,219,027,017
Earned Federal Funds, estimated	11,327,627	11,327,627
Appropriated Receipts, estimated	25,247,510	26,375,545
Interagency Contracts	<u>10,671,132</u>	<u>10,671,132</u>

Total, Method of Financing	<u>\$ 5,751,896,089</u>	<u>\$ 6,607,006,152</u>
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Schedule of Exempt Positions

Commissioner of Health	\$148,683	\$148,683
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Bond Debt Service	\$ 1,286,550	\$ 1,283,514
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Administrative and Support Cost as a Percent of Expenditures	0.5%	0.5%
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1. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

DEPARTMENT OF HEALTH
(Continued)

	<u>1994</u>	<u>1995</u>
a. Acquisition or Lease-purchase or Information Resource Technologies:		
(1) WIC Automation	\$ 800,114	\$ 1,276,826
(2) Maternal & Child Health ICES Project	2,284,100	2,142,900
(3) Immunization Tracking Automation	<u>1,783,729</u>	<u>952,729</u>
Subtotal	<u>\$ 4,867,943</u>	<u>\$ 4,372,455</u>
b. Lease payments to the Master Equipment Lease Purchase Program (1992/1993)	<u>\$ 118,274</u>	<u>\$ 117,818</u>
Total, Capital Budget	<u>\$ 4,986,217</u>	<u>\$ 4,490,273</u>
Method of Financing (Capital Budget):		
General Revenue	\$ 1,902,003	\$ 1,070,547
Federal Funds	<u>3,084,214</u>	<u>3,419,726</u>
Total, Method of Financing (Capital Budget)	<u>\$ 4,986,217</u>	<u>\$ 4,490,273</u>
2. Authorization to Receive, Administer, and Disburse Federal Funds. The appropriations made herein may be used to match federal funds granted to the state for the payment of personal services and other necessary expenses in connection with the administration and operation of a state program of public health services. Notwithstanding the provisions of Article V, Sections 22 and 23 of this Act, the Texas Board of Health is hereby authorized to receive and disburse in accordance with plans acceptable to the responsible federal agency, all federal moneys that are made available (including grants, earnings, allotments, refunds and reimbursements) to the state for such purposes, and to receive, administer, and disburse federal funds for federal regional programs in accordance with plans agreed upon by the Department of Health and the responsible federal agency, and such other activities as come under the authority of the Texas Board of Health, and such moneys are hereby appropriated to the specific purpose or purposes for which they are granted or otherwise made available.		
3. Appropriation of Radiation and Perpetual Care Fund Revenues. Any revenue collected and deposited in the Radiation and Perpetual Care Fund No. 476 is hereby appropriated during the biennium beginning September 1, 1993.		
4. Appropriations for Texas Diabetes Council. Any funds collected by the Department of Health for the Texas Diabetes Council, pursuant to Health and Safety Code, Chapter 103, are hereby appropriated for carrying out the provisions of the Act.		
5. Unexpended Balances - Falls City Mill Tailing Site. Any unexpended balances appropriated for the biennium ending August 31, 1993 for the purpose of cleaning up the mill tailing site at Falls City are hereby reappropriated for the same purposes for the biennium beginning September 1, 1993.		
6. Fee Receipts. Included in the fee receipts appropriated out of the Department of Health Fee Receipts Fund No. 750 are the revenues collected and deposited in the following accounts in Fund No. 750.		

DEPARTMENT OF HEALTH
(Continued)

	For the Years Ending	
	August 31, 1994	August 31, 1995
Out of the TDH Fee Receipts Fund No. 750, estimated:		
Mammography Certification Fees	\$ 385,768	\$ 229,350
EMS Fees	285,200	285,200
Riding Stable Fees	17,584	17,584
Tanning Facility Fees	53,396	53,396
HIV Training Fees	4,100	4,100
Oyster Sales Fees	253	253
Labor Camp Inspection Fees	12,203	12,203
Food Service Workers Fees	114,062	114,062
Asbestos Removal License Fees	631,448	631,448
Workplace Chemical List Fees	379,725	379,725
Health Service Providers Registration Fees	13,901	13,901
Respiratory Care Practitioners Fees	174,430	174,430
Massage Therapy and Establishment Fees	227,958	227,958
Inhalant Abuse Permit Fees	45,557	45,557
Medical Radio Technician Certification Fees	194,496	194,496
Chest Hospitals' Medical Services Trust Fund Fees	820,719	820,719
Food and Drug Fees	2,794,266	2,794,266
Lead Poisoning Test Fees	37,000	37,000
Crippled Children Refunds	80,235	80,235
Marriage & Family Therapist Fees	113,940	113,940
Medical Physicist Fees	32,435	32,435
HIV Notification Fees	100	100

7. **Appropriation of Fees.** Fee revenues that are collected by the Department of Health and deposited in the fee funds listed under the subheading Other Funds in the Method of Financing are hereby appropriated to the department for the 1994-95 biennium.
8. **Unexpended Balances - Communicable Diseases.** In addition to other provisions of this Act which relate to the reappropriation of unexpended balances, and subject to the approval of the Board of Health, all unexpended balances not otherwise restricted from appropriations to strategy A.4.3, Immunizations TB & STD and strategy A.4.4, Epidemiology Activities, at the close of the fiscal year ending August 31, 1994, are reappropriated for the fiscal year beginning September 1, 1994.
9. **Internal Accounting.** The State Comptroller is authorized to establish a special fund in the State Treasury to be known as the Department of Health Operating Fund. The expenditures of the Texas Department of Health shall be allocated to the various funds in accordance with the internal accounting system approved by the State Auditor. At the close of the fiscal year, any remaining unencumbered balance in the Department of Health Operating Fund shall be reported to the State Comptroller by funds to which it belongs as determined and designated by the Department of Health. Unencumbered balances thus identified with fund balances which revert to the General Revenue Fund under Legislative Acts shall be returned to the appropriate funds as determined and designated by the Department of Health.

DEPARTMENT OF HEALTH
(Continued)

10. **Statement of Professional Fees.** A report shall be filed, in compliance with Article V of this Act, by the Texas Department of Health giving an itemized statement of all professional fees paid out of appropriations made in this Act. It is the intent of the Legislature that such list shall not include professional fees paid for routine or special examinations for the purpose of determining eligibility of individuals for any of the programs administered by the department, professional fees for treatment, services or care for individual recipients, or for providing special needs or appliances such as fees to pharmacists for filling prescriptions for individual recipients, but shall include fees for professional services or consultative services rendered for the general administration of the department.
11. **Accounting of Support Costs.** The State Comptroller shall establish separate accounts from which certain support costs shall be paid. The Department of Health is hereby authorized to make transfers into and out of these separate accounts from appropriated funds in order to pay for these expenses in an efficient and effective manner. Only costs not directly attributable to a single program may be budgeted in or paid from these accounts. Items to be budgeted in and paid from these accounts include but are not limited to: postage, occupancy costs, equipment repair, telephones, office printing costs, supplies, freight and transport costs, telephone system costs and salary and travel costs of staff whose function supports several programs.
12. **Rate of Per Diem.** Out of the funds appropriated above, the Department of Health is hereby authorized to pay board members in accordance with provisions of Article V of this Act.
13. **Chronically Ill and Disabled Children's Services, Gifts, Donations and Refunds.** Subject to the limitations appearing in this Act, all gifts, donations and refunds for chronically ill and disabled children work received under the provisions of Health and Safety Code, Chapter 35, and any amendments thereto, and any unexpended balances are hereby appropriated for the biennium covered by this Act to the Chronically Ill and Disabled Children's Services Program for its use under the provisions of this Act. It is the intent of the Legislature that the Board of Health maximize the effective utilization of existing hospital, clinic, and other outpatient facilities and other professional services in the local communities as close to the home of patients as practicable.
14. **Immunization of Employees.** Moneys appropriated above may be expended for any immunization which is required of employees at risk in the performance of their duties.
15. **Unexpended Balances Acquired Immune Deficiency (AIDS) and Human Immunodeficiency Virus (HIV).** All unexpended balances appropriated for the fiscal year ending August 31, 1994 in strategy A.4.2., HIV Services & Education, are hereby appropriated for the same purposes for the fiscal year beginning September 1, 1994.
16. **Genetic Counseling Service.** The Department of Health is authorized to charge for genetic counseling services at a rate not to exceed the actual cost of providing such services. The department shall develop a fee structure to allow full recovery of cost to the maximum extent possible. However the fee structure shall be based on ability to pay in order to insure that indigent individuals are not denied services. The proceeds from such charges shall be retained and used by the department for the continued provision of such preventative services. Any unobligated fee collection balances remaining at the end of a fiscal year are hereby reappropriated for the same purposes for the next fiscal year.
17. **Texas Department of Transportation Transfers.** Any funds transferred from the Texas Department of Transportation are hereby appropriated for emergency medical services improvements. All unexpended balances of these funds at the close of the fiscal year ending August 31, 1994, are reappropriated for the fiscal year beginning September 1, 1994.

DEPARTMENT OF HEALTH
(Continued)

18. **Resident Physicians Compensation Primary Care Emphasis.** In order to ensure that the goals of Chapter 58, Texas Education Code, and Chapter 61.097 through 61.099 are met, the Department of Health shall direct these funds to primary care residency programs.
19. **Medical Assistance Payments and Unexpended Balances.** Funds for Medical Assistance payments appropriated hereinabove out of the General Revenue Fund for Medicaid services shall be payable in equal monthly installments on the first day of each calendar month; provided, however, that any balances on hand in such funds may be carried over from month to month during each fiscal year and from fiscal year 1994 to fiscal year 1995, and such funds are reappropriated to the department for the 1994-95 biennium.
20. **Attorney General Representation.** The Attorney General and the Commissioner of Health are authorized to jointly select one or more Assistant Attorneys General to be assigned to the Texas Department of Health for the purpose of assisting with the legal work of the department and, more particularly, of representing the department in lawsuits. The Assistant Attorneys' General salaries shall be in the amounts to be agreed upon between the Attorney General and the Commissioner and said salaries, travel and other incidental expenses and the salary and expenses of the required clerical staff shall be paid out of any appropriation to the Texas Department of Health.
21. **Reappropriation of Federal and Local Funds.** All funds received by the department from counties, cities, federal agencies and from any other local source and all balances from such sources as of August 31, 1993, are hereby appropriated for the biennium ending August 31, 1995, for the purpose of carrying out the provisions of this Act.
22. **Disposition of State Funds Available Resulting from Federal Match Ratio Change.** In the event the Federal Medical Assistance Percentage should be greater than 63.33% for federal fiscal year 1995, the department shall be authorized to expend the state funds thereby made available only to the extent authorized in writing by the Legislative Budget Board. A copy of such authorization shall be provided to the Comptroller of Public Accounts to assist in monitoring compliance with this provision.
23. **Risk Stabilization Reserve.** Upon termination of a contract with the insurance carrier for purchased health insurance, the state's share of the refunds of the unexpended balance in the risk stabilization reserve shall be deposited in the General Revenue Fund and such funds are not reappropriated to the Department of Health.
24. **Appropriation of Receipts: Civil Monetary Damages and Penalties.** Out of funds collected by the department as civil monetary damages and penalties under Human Resources Code Section 32.039, there are appropriated to the department amounts equal to the costs of the investigation and collection proceedings conducted under that section, and any amounts collected as reimbursement for claims paid by the department.
25. **Payment of Hospital Providers.** At the hospital's option, all payments from funds appropriated for Purchased Health Services made to hospitals with 100 or fewer licensed beds may be reimbursed under a cost-reimbursement methodology authorized by the Tax Equity and Fiscal Responsibility Act of 1984 (TEFRA), using the most current available cost figures. Hospitals reimbursed under TEFRA cost principles shall be paid without the imposition of the TEFRA cap.

At initial cost settlement of the hospital's fiscal year, the Department of Health shall determine the amount of reimbursement the hospital would have been paid under TEFRA cost principles, and if the amount of reimbursement under the TEFRA principles is greater

DEPARTMENT OF HEALTH
(Continued)

than the amount of reimbursement received by the hospital under the prospective payment system, the Department of Health shall reimburse the hospital the difference.

26. **Use of Additional Drug Rebates.** The Department of Health is authorized to receive and spend Medicaid rebate revenues from pharmaceutical manufacturers pursuant to the federal requirements of the Omnibus Budget and Reconciliation Act of 1990. In the event these rebate revenues should be greater than \$23,208,210 in fiscal year 1994 or \$24,227,041 in fiscal year 1995, the department shall be authorized to expend the state funds thereby made available only to the extent authorized in writing by the Legislative Budget Board. A copy of such authorization shall be provided to the Comptroller of Public Accounts to assist in monitoring compliance with this provision.
27. **Outstanding Rural Scholar Fund Appropriation.** Community financial support received by the Department of Health and deposited into the Outstanding Rural Scholar Fund No. 656 is hereby appropriated to the Department for the purposes specified in Article 4414b-1.1, V.A.C.S. Any balances remaining in Fund No. 656 as of August 31, 1993 are reappropriated for the fiscal year beginning September 1, 1993. Any balances remaining in Fund No. 656 as of August 31, 1994 are reappropriated for the fiscal year beginning September 1, 1994.
28. **State Chest Hospital Provisions.** The State Chest Hospitals operated by the Department of Health are the South Texas Hospital and the San Antonio State Chest Hospital. The Provisions applying to the State Chest Hospitals are as follows:
 - a. In addition to salary, the Hospital Directors of the State Chest Hospitals are authorized a house, utilities, and supplement from the Medical Services Trust Fund.
 - b. All balances as of August 31, 1993 in the Medical Services Trust Fund as well as any receipts received during the 1994-95 biennium are hereby appropriated for the biennium beginning September 1, 1993 for the purposes as stated in Chapter 13 of the Health and Safety Code.
 - c. The professional liability insurance premiums may be paid for physicians employed the State Chest Hospitals out of the appropriations from the Medical Services Trust Fund fees.
 - d. It is the intent of the Legislature that the Department of Health develop interagency agreements with the Texas Department of Mental Health and Mental Retardation (TDMHMR) so that medical and surgical services, auxiliary services, pharmacy and laboratory services and other support services of TDMHMR facilities are provided to the extent possible by the two State Chest Hospitals. The San Antonio State Chest Hospital may provide utilities and inpatient treatment and care services to the San Antonio State Hospital and the San Antonio State School without reimbursement.
 - e. Out of the funds appropriated above the South Texas Hospital shall support medical education through the South Texas Family Practice Residency Program-McAllen with the cooperation of the University of Texas Health Science Center at San Antonio.
 - f. All charges, fees and receipts collected by the Department of Health Chest Hospitals are hereby appropriated to the Department to enhance the provision of Tuberculosis services. This would include hospital equipment, renovations, and repairs in addition to those capital items listed in Appropriation Rider 1, Capital Budget, above.
 - g. It is expressly provided that the State Chest Hospitals, to the extent permitted by law, may pay FSLA exempt and FSLA non-exempt employees on a straight-time basis for

DEPARTMENT OF HEALTH
(Continued)

work on a holiday or for regular compensatory time hours when the taking of regular compensatory time off would be disruptive to normal business functions.

29. **Local Health Department Contracts.** None of the funds appropriated above for contracts with Local Health Departments may be expended unless contract amounts are rendered under the terms and conditions of need-based contracts. To determine need for each local health department, the department shall establish levels of fee revenue and/or program income utilizing the fee schedule used by the public health regions. Using expected revenue collections, the department shall establish performance based objectives for the local health departments. Allocations shall be based on established need and the attainment of objectives delineated in the contracts.
30. **Transfer Authority.** In addition to other transfer provisions contained in this Act, an amount not to exceed fifty (50) percent in each fiscal year of any item of appropriation made to the Texas Department of Health may be transferred to another item of appropriation of the department upon approval by the Texas Board of Health, following a written request by the commissioner, whenever such board deems that such transfers are necessary to make the most direct public health services. Direct public health services are defined as medical services to individuals; epidemiological investigations; identifications, control or elimination of environmental health hazards; and regulatory activities authorized in the above appropriations except cooperative meat inspection. No transfers shall be made from Strategy A.1.4., Meat Product Inspection.

Upon request of the Commissioner, the Texas Board of Health may transfer an amount not to exceed thirty-five (35) percent in each fiscal year from an appropriated line item to another within Goal B, Medicaid Services, for the purpose of maximizing funding opportunities and ensuring optimal client services.

Certified copies of the board's authorization of such transfers along with a detailed explanation of the relationship of the amount of the transfer and the change in the number of clients to be served, shall be filed with the State Comptroller, Governor's Budget and Planning Office and the Legislative Budget Board.

31. **Disposition of Appropriation Transfers from State Owned Hospitals.** The Department of Health shall use the sums transferred from state owned hospitals as provided elsewhere in the Act as necessary to apply for appropriate matching federal funds and to provide the state's share of disproportionate share payments due to state owned hospitals. Any amounts of such transferred funds not required for disproportionate share payments shall be deposited by the Department of Health to the General Revenue Fund as unappropriated revenue. At the beginning of each fiscal year, the Department of Health shall present a schedule of projected transfers and payments to the Comptroller of Public Accounts and the Legislative Budget Board for their approval. Subsequent to approval of the projected schedule, the Comptroller of Public Accounts shall approve all payments and transfers.
32. **Transfers of Appropriations - State Owned Hospitals.** The State Chest Hospitals shall transfer from non-Medicaid state appropriated funds \$19,965,738 in fiscal year 1994 and \$15,557,477 in fiscal year 1995 to the Department of Health. The timing and form of such transfers shall be determined by the Comptroller of Public Accounts in consultation with the Department of Health. The Legislative Budget Board is authorized to adjust the amounts of such transfers as necessary to match available federal funds.
33. **Disproportionate Share Hospital Eligibility.** A hospital that provides health care to indigents pursuant to an agreement or contract with a state agency or department, at no cost to the state, may be eligible as a disproportionate share hospital under Chapter 61, Health and

DEPARTMENT OF HEALTH
(Continued)

Safety Code, and the Texas Medicaid program. Such hospital's total expenditures for indigent health care, according to such agreement or contract, may be credited as local revenue to be used to determine disproportionate share eligibility.

34. **Border Health Initiatives.** In addition to appropriations made above in Strategy A.1.1., Border Health/Colonias, there is hereby appropriated to the Texas Department of Health an estimated \$2,945,411 in fiscal year 1994 and an estimated \$764,853 in fiscal year 1995 from federal reimbursements deposited to General Revenue related to State Legalization Impact Assistance Grants (SLIAG) to be expended for border health initiatives and development and implementation of a birth defects registry in two public health regions. Any unexpended balances remaining as of August 31, 1994 from these appropriations are hereby appropriated for the same purpose in fiscal year 1995.
35. **Sunset Contingency.** Funds appropriated above to the Department of Health for fiscal year 1995 for the Texas State Board of Dietitians, Lay Midwifery Board, State Committee of Examiners for Speech-Language Pathology and Audiology, Board of Marriage and Family Therapists Examiners and the Texas State Board of Examiners of Professional Counselors are made contingent on the continuation of the each respective board by the Legislature. In the event the boards are not continued, the funds appropriated for fiscal year 1994 or as much thereof as may be necessary to be used to provide for the phase out of the board operations.
36. **Professional Liability Insurance Premiums.** From the appropriations made above, the Department may also pay the professional liability premiums for those physicians, dentists, nurses, and other medical personnel involved in providing medical care in the Department's clinical operations.
37. **Diabetes Council.** Out of funds appropriated above in Strategy A.4.1., Control Chronic Diseases, an amount not to exceed \$3,000,000 each fiscal year of the 1994-95 biennium shall be used by the department in the expansion of diabetes services. Diabetes services include, but is not exclusive of nutrition programs, professional education, public information and providing diabetic medications and supplies.
38. **Contingency Appropriation, Senate Bill No. 426.** Out of funds appropriated above for Strategy D.2.1., Community Primary Care, \$1,000,000 each year of the 1994-95 biennium are contingent upon the enactment of Senate Bill No. 426 or similar legislation establishing three family practice pilot programs. The Department of Health shall coordinate with the Higher Education Coordinating Board in the development of this program.
39. **Appropriation of Fees.** Contingent upon passage of House Bill 1147 or House Bill 2178, 73rd Legislature, Regular Session, any revenue collected related to the assessment of fees which are deposited to the Sexual Assault Program Fund are hereby appropriated for the biennium beginning September 1, 1993 for the purposes of implementing the provisions of the Act.
40. **Contingency Appropriation of Fee Revenue.** Contingent upon the passage of the following bills or similar legislation by the 73rd Legislature, Regular Session, any receipts and balances collected by the Texas Department of Health pursuant to these Acts are hereby appropriated for the biennium beginning September 1, 1993 for the purposes of implementing the provisions of the following Acts: House Bill 781, inspection of medical and dental electrical products; House Bill 1217, regulation of tattoo parlors; House Bill 1483, regulation of women's service centers; House Bill 1592, Texas Hospice Act; House Bill 1680, asbestos demolition and renovation; House Bill 1712, regulation of animal control officers; House Bill 1835, regulation of perfusionists; House Bill 1884, cooperative agreements among hospitals; Senate Bill 91, lead poison testing; Senate Bill 564, licensing of medical device wholesale

DEPARTMENT OF HEALTH
(Continued)

distributors; Senate Bill 674, regulation of nursing facility administrators; Senate Bill 953, licensing of fitters and dispensers of hearing instruments; Senate Bill 1278, licensing of lead abatement activities; Senate Bill 1421, regulation of food service establishments; Senate Bill 1426, regulation of social workers; and Senate Bill 1433, regulation of the practice of midwifery.

HEALTH AND HUMAN SERVICES COMMISSION

For the Years Ending	
August 31, 1994	August 31, 1995

A. Goal: COORDINATE SERVICES

To facilitate and enforce coordinated planning and delivery of health and human services in a manner that uses an integrated system to determine client eligibility, that maximizes the use of federal, state and local funds, and that emphasizes coordination, flexibility, and decision making at the local level.

A.1. Objective:

Implement a comprehensive statewide plan for Health & Human Services

Outcomes:

Percent (weighted by client) of programs for which the eligibility determination process was integrated with at least one other program.

1%

52%

A.1.1. Strategy: DEVELOP HHS SYSTEM

To develop an integrated service delivery system for the health and human service agencies in Texas by September 1, 1995

\$ 3,897,923	\$ 3,894,076
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Outputs:

Percent (weighted by client) of health and human service agencies whose client databases are integrated into a common health and human service client database.

51%

B. Goal: SEC 146, 1993 SALARY INC

Section 146, 1993 Salary Increase

\$ 66,192	\$
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Grand Total, HEALTH AND HUMAN SERVICES COMMISSION

\$ 3,964,115	\$ 3,894,076
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Method of Financing:

General Revenue Fund

\$ 2,879,836	\$ 2,811,174
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Federal Funds, estimated

225,000	225,000
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Earned Federal Funds, estimated

859,279	857,902
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Total, Method of Financing

\$ 3,964,115	\$ 3,894,076
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Schedule of Exempt Positions

Commissioner

\$156,014	\$156,014
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Administrative and Support Cost as a Percent of Expenditures

10.8%

10.7%

1. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A. Notwithstanding Article V limitations placed on the expenditure of funds for capital budget items, funds listed below that are not needed for

HEALTH AND HUMAN SERVICES COMMISSION (Continued)

lease-purchase payments may be expended by the commission to carry out the commission's statutory duties and the provisions of this act.

	<u>1994</u>	<u>1995</u>
Out of the General Revenue Fund:		
a. Lease Payments to the Master Equipment Lease Purchase Program (1992-93)	\$ 251,177	\$ 282,432
Total, Capital Budget	<u>\$ 251,177</u>	<u>\$ 282,432</u>

2. **Federal Funds Appropriated.** The Health and Human Services Commission is hereby authorized to receive and disburse in accordance with plans acceptable to the responsible federal agency, all federal funds that are made available to the Commission, including earned federal funds, and to receive, administer, and disburse funds for federal programs in accordance with plans agreed upon by the Commission and the responsible federal agency, and such funds are appropriated to the Health and Human Services Commission to the specific purpose or purposes for which they are granted or otherwise made available.
3. **Budget Authority for Estimated Pass-through Funds.** In addition to the amounts appropriated above for the Health and Human Services Commission, the commission may establish additional budget authority with Comptroller of Public Accounts to reflect other estimated income except from the General Revenue Fund.
4. **Audit of Medicaid Funds.** All transactions involving the transfer or investment of any funds of the Title XIX Medicaid program, held in trust or reserve for the state by any non-governmental entity shall be subject to audit by the State Auditor's Office.
5. **Annual Report - Professional Fee Exemption.** It is the intent of the Legislature that the Annual Report required by Article V of this Act shall not include professional fees paid for treatment, services or care for individuals eligible for Title XIX (Medicaid) services, or for providing special needs or appliances such as fees to pharmacists for filling prescriptions for individual recipients; but shall include fees paid for professional services or consultative services rendered for the general administration of the commission.
6. **Attorney General Representation.** The Attorney General and the Commissioner of the Health and Human Services Commission are authorized to jointly select one or more Assistant Attorneys General to be assigned to the Health and Human Services Commission for the purpose of assisting with the legal work of the commission and, more particularly, of representing the commission in lawsuits. The Assistant Attorneys' General salaries shall be in the amounts to be agreed upon between the Attorney General and the Commissioner and said salaries, travel and other incidental expenses and the salary and expenses of the required clerical staff shall be paid out of any appropriation to the Health and Human Services Commission.
7. **Title XX Fund Reduction.** In the event of a reduction in federal Title XX (Social Services Block Grant) funding, the commission should attempt to maintain the affected programs as near to the appropriated levels as possible through use of transfer authority or the allocation of any other available funds. If maintenance of the appropriated levels is not feasible, the commission shall reduce all affected programs in proportion to the total amounts appropriated.

HEALTH AND HUMAN SERVICES COMMISSION
(Continued)

8. **Appropriation of Earned Federal Funds.** All unobligated and unexpended balances of earned federal funds on hand as of August 31, 1993 and all earned federal funds received during the biennium ending August 31, 1995 are hereby appropriated to the commission for purposes of carrying out this Act.
9. **Review of the Medical Malpractice Indemnification Program.** The Health and Human Services Commission in conjunction with the Center for Rural Health Initiatives shall conduct a review of the medical malpractice indemnification program created by House Bill 18, Seventy-first Legislature, 1989. The Department of Insurance and the State Auditor shall provide advice, information, and staff assistance to the commission at its request. The review shall assess the effectiveness of the program in terms of providing an adequate incentive for health care providers to serve indigent patients. Also, the review shall provide recommendations to the Seventy-fourth Legislature that will indicate the best methods for increasing access to health care for indigent patients in rural areas of Texas.

DEPARTMENT OF HUMAN SERVICES

For the Years Ending	
August 31,	August 31,
1994	1995

A. Goal: LONG-TERM CARE CONTINUUM

To provide a continuum of care ranging from in-home and community based services for elderly people and people with disabilities who need help in maintaining their independence, to institutional care for those who require that level of support, seeking to maintain maximum independence for the client while providing the support required.

A.1. Objective:

Provide appropriate services to elderly and people with disabilities

Outcomes:

Percent of Clients in the Continuum of Care Served in Community Settings

56.68% 57.01%

Percent Change in Medicaid Bed Utilization - ICF-MR/RC Facilities

7.3% 10.5%

Percent Change in Medicaid Bed Utilization - Nursing Facilities

1.12% 1.94%

Percent Change in the Number of Providers Sanctioned for Patient Care Problems - ICF-MR/RC Facilities

-2% -2%

Percent Change in the Number of Providers Sanctioned for Patient Care Problems - Nursing Facilities

-2% -2%

A.1.1. Strategy: ASSIST WITH DAILY NEEDS

Provide assistance with daily needs in homes and community settings which will enable elderly people, people with disabilities, and others to maintain their independence and prevent institutionalization.

\$ 386,225,094 \$ 418,060,160

Outputs:

Number of People Served per Month - TOTAL

78.536 83.098

Efficiencies:

Average Monthly Cost per Client Served - Non-Waiver Community Care

369.87 391.13

DEPARTMENT OF HUMAN SERVICES
(Continued)

Average Monthly Cost per Client Served - Nursing Facility Waiver Clients	1,129.2	1,200.53
Average Monthly Cost per Client Served - Persons With Related Conditions	1,928.65	2,005.8
Average Monthly Cost per Client Served - Hospice Clients	1,593.63	1,657.34
A.1.2. Strategy: SUBSIDY/CAPITAL EXPENSES		
Provide cash subsidy and provide reimbursement for capital improvements, purchase of equipment, and other expenses to enable people to maintain their independence and prevent institutionalization.	\$ 6,620,323	\$ 6,620,323
Outputs:		
Number of Clients Receiving In-Home/Family Support Cash Subsidy/Year	2,196	2,196
Number of Clients Receiving Capital Expenditure Reimbursement Annually	920	920
Efficiencies:		
Average Annual Cost IHFS/Client	1,984	1,984
Average Cost per Capital Expenditure	2,329	2,329
A.1.3. Strategy: LTC ELIGIBILITY SERVICES		
Provide timely and accurate eligibility determination for all individuals who apply and service planning and referral for all elderly people and people with disabilities who qualify for services within this continuum of care.	\$ 75,528,712	\$ 61,469,440
Outputs:		
Number of Persons Determined Eligible - Nursing Facilities	67,655	69,137
Number of Persons Determined Eligible - Community Care	86,111	90,890
Efficiencies:		
Cost per Eligibility Determination - ICF-MR/RC Facilities	138.43	118.81
Cost per Eligibility Determination - Nursing Facilities	220.56	187.03
Long-Term Care Medicaid Eligibility Quality Control Accuracy Rate	97.31%	96.83%
A.1.4. Strategy: NURSING HOME PAYMENTS		
Provide payments which will promote quality care for clients with medical problems which require care and services in nursing facilities.	\$ 1,201,744,808	\$ 1,081,512,078
Outputs:		
Average Number of Persons Receiving Medicaid-Funded Nursing Facility Services per Month	68,144	69,626
Number of Persons Receiving Specialized Services	3,183	3,519
A.1.5. Strategy: ICF-MR/RC PAYMENTS		
Provide payments which will promote quality care for medical treatment and active habilitative/restorative care for Medicaid eligible individuals with mental retardation and/or related developmental disabilities in a community-based facility.	\$ 233,364,702	\$ 216,618,110
Outputs:		
Average Number of Persons in Medicaid Beds per Month - TOTAL	7,217	7,491
A.1.6. Strategy: RATE SETTING FOR LTC		
Provide reimbursement rate expertise for elderly people and people with disabilities.	\$ 1,583,456	\$ 1,586,642
Outputs:		
Number of Provider Cost Reports Analyzed	2,699	2,843
Number of Provider Cost Reports Field Audited	234	234
Efficiencies:		
Ratio of Reimbursement Rate Development/Maintenance Cost to Service Cost	.07%	.07%

DEPARTMENT OF HUMAN SERVICES
(Continued)

A.1.7. Strategy: SURVEY/CERTIFICATION

Provide inspection and certification services to residential facilities to ensure compliance with state and federal standards.

\$ 29,047,945 \$ 28,377,883

Outputs:

Number of Providers Meeting Minimum Quality Standards - XIX Certification

1,729 1,992

Number of Providers Meeting Minimum Quality Standards - XVIII Certification

535 535

Number of PASARR Assessments (Annually)

20,443 20,888

Efficiencies:

Average Cost per Survey

3,010 3,010

Cost per PASARR Assessment

218.31 181.58

Total, Objective A.1: Provide appropriate services to elderly and people with disabilities

\$ 1,934,115,040 \$ 1,814,244,636

Total, Goal A: LONG-TERM CARE CONTINUUM

\$ 1,934,115,040 \$ 1,814,244,636

B. Goal: FAMILY/INCOME ASSISTANCE

To provide prompt, comprehensive, and effective support and preventive services to low-income families that encourage self-sufficiency and long-term independence from public assistance.

B.1. Objective:

Provide AFDC grants, food stamps, Medicaid cards, nutrition assistance

Outcomes:

Percent of Eligible (or Potential Eligible) Population Receiving Service - School Lunch and Breakfast

77% 80%

Percent of Poverty Met by AFDC-Basic, Food Stamps, and Medicaid Benefits/Family of Three

73.95% 74.2%

B.1.1. Strategy: ELIGIBILITY DETERMINATION

Provide accurate and timely eligibility services for financial assistance, medical benefits, and food stamps through the use of new technology, improved management practices, and implementation of sufficient staff levels.

\$ 354,701,566 \$ 392,295,484

Outputs:

Total Number of Cases per Month - AFDC

296,906 317,301

Number of Persons Participating in Health Education Sessions per Month

3,284 3,284

Number of Individual and Group Health Education Sessions Held

678 678

Efficiencies:

Cost per Determination - AFDC

36 36.28

Cost per Determination - Food Stamps

45.68 46.02

Cost per Determination - Medicaid

46.72 47.08

B.1.2. Strategy: AFDC GRANTS

Provide AFDC grants to eligible low-income Texans.

\$ 585,725,567 \$ 623,513,151

Outputs:

Number of AFDC Basic Recipients per Month

795,452 847,156

Number of AFDC-UP Recipients per Month

32,754 33,409

Efficiencies:

Percent of AFDC Need Standard Met by Maximum AFDC Grant for Family of Three

24.5% 24.5%

Percent of Federal Poverty Income Guidelines Met by Maximum AFDC Grant for Family of Three

18.2% 17.6%

DEPARTMENT OF HUMAN SERVICES
(Continued)

B.1.3. Strategy: NUTRITION ASSISTANCE

Administer and provide federal food and nutrition programs, including the distribution of commodities to eligible needy Texans.

\$ 157,986,642 \$ 186,025,599

Outputs:

Number of Meals Served Through DHS School Lunch and Breakfast Daily

32,075

33,413

Number of Children Served Through Summer Food Services

141,077

159,417

Efficiencies:

Cost per Meal - School Lunch

1.16

1.17

Cost per Meal - School Breakfast

1.12

1.14

Cost per Meal - Summer Food Services

1.86

1.89

Total, Objective B.1: Provide AFDC grants, food stamps, Medicaid cards, nutrition assistance

\$ 1,098,413,775 \$ 1,201,834,234

B.2. Objective:

Provide employment and support services to AFDC and food stamp clients

Outcomes:

Length of Time a Household Receives AFDC-Basic Expressed as a Percent - 0-12 Months

29.8%

29.8%

Length of Time a Household Receives AFDC-Basic Expressed as a Percent - Greater Than 12 Months but Less Than 24 Months

16.4%

16.4%

Length of Time a Household Receives AFDC-Basic Expressed as a Percent - 24 Months or Greater

53.8%

53.8%

Percent of Individuals Completing JOBS Training Whose Salary is Above Minimum Wage

70%

72%

Percent of AFDC Caretakers Who Leave AFDC Rolls Because of Increased Earnings due to Employment per Year

12.7%

12.7%

Percent of Food Stamp E and T Participants Who Enter Employment per Year

22.1%

22.1%

B.2.1. Strategy: EMPLOYMENT/RELATED SRVCS

Administer and provide employment services, including case management, education, child care, reimbursement of employment-related transportation expenses, job training, job development, and related supportive services such as health education and life skills training.

\$ 86,901,235 \$ 91,995,715

Outputs:

Number of JOBS Participants Who Complete Component Activity or Become Employed Each Month

32,366

31,863

Number of Children Served Through Child Care Services (E&T and JOBS)

9,879

9,517

Efficiencies:

Average Cost per JOBS Client Leaving AFDC Rolls due to Earnings

4.861

5.065

B.2.2. Strategy: CHILD CARE SERVICES

Provide access to child care for eligible children in low-income families to enable parents to continue to work.

\$ 152,048,961 \$ 153,046,361

Outputs:

Number of Children Served Through Child Care Services

38,646

37,242

Number of Caretakers Able to Work Because of Use of Child Care Services

21,342

20,581

Efficiencies:

Average Cost per Child per Day for Child Care Services

12.92

13.47

DEPARTMENT OF HUMAN SERVICES (Continued)

Total, Objective B.2: Provide employment and support services to AFDC and food stamp clients

\$ 238,950,196 \$ 245,042,076

Total, Goal B: FAMILY/INCOME ASSISTANCE

\$ 1,337,363,971 \$ 1,446,876,310

C. Goal: ABUSE/NEGLECT PROTECTION

To protect children and vulnerable adults from abuse, neglect, and exploitation.

C.1. Objective:

Accessible temporary safety & support services for adults & children

Outcomes:

Percent of Battered Women in Need of Shelter Who Receive Shelter

10.52% 10.52%

Percent of State Population for Whom Services are Accessible

93.25% 93.25%

C.1.1. Strategy: TEMPORARY SHELTER/SUPPORT

Provide temporary safety, shelter, and other support services to vulnerable adults and children.

\$ 9,058,344 \$ 9,049,955

Outputs:

Number of Children and Adults Provided Services - Shelter Residential Services

27,235 27,711

Number of Children and Adults Provided Services - Non-Residential Services

12,130 8,799

Efficiencies:

DHS Cost per Person Served in Residential Services

415.13 432.57

DHS Cost per Person Served in Non-Residential Services

103.82 108.18

C.2. Objective:

Ensure services to runaway & at-risk youth

Outcomes:

Percent of Population Ages 10-17 Provided Runaway and At-Risk Services - Residential Services

.08% .08%

C.2.1. Strategy: SERVICES TO RUNAWAY YOUTH

Provide services, such as emergency shelter care, crisis intervention counseling, and casework services to runaway or at-risk youth and their families.

\$ 4,193,338 \$ 4,193,338

Outputs:

Number of Youth Served (Unduplicated Count) - Residential Services

1,862 1,789

Number of Counties in Which Services are Provided

60 60

Number of Youths Served - Gang Activity Prevention Program

120 120

Efficiencies:

DHS Cost per Participating County

62.989 62.989

Total, Goal C: ABUSE/NEGLECT PROTECTION

\$ 13,251,682 \$ 13,243,293

D. Goal: SOCIAL WORKER TITLE

Help protect the public from misrepresentation by uncertified social work providers through administration of the social work certification program.

D.1. Objective:

Certify social workers to ensure basic qualifications met

Outcomes:

Ratio of Complaints Filed per 100 Licensee Population

.4 .45

Percent of Complaints Resolved Resulting in Disciplinary Action

25% 25%

DEPARTMENT OF HUMAN SERVICES
(Continued)

D.1.1. Strategy: S.W. CERTIFICATION SYSTEM		
Operate a system of certification, enforcement, and professional development for social workers.		
	\$ 327,585	\$ 330,613
Outputs:		
Total Number of Individuals Certified	13,500	14,000
Complaints Received	60	70
Efficiencies:		
Average Time for Complaint Investigation (Days)	50	50
Average Cost per Investigation	925	925
E. Goal: EQUITABLE ACCESS (ADA)		
Provide equitable access to quality services and agency employment		
E.1. Objective:		
Remove barriers to employment and program participation		
Outcomes:		
Percent of Work Force Represented by People With Disabilities	6.7%	6.7%
Percent of Work Force With Disabilities Whose Salary is Greater Than the Mean for the Agency	7.5%	7.5%
E.1.1. Strategy: ADA IMPLEMENTATION		
Continue implementation of provisions of the Americans with Disabilities Act (ADA).		
	\$ 149,206	\$ 139,076
Outputs:		
Average Salary for Employees With Disabilities	29,161	29,161
E.1.2. Strategy: DISABILITIES PLAN (OSPD)		
Continue implementation of the Office of Services to Persons with Disabilities Plan.		
	\$ 347,827	\$ 347,265
Outputs:		
Number of Plan Objectives Achieved	14	14
Total, Objective E.1: Remove barriers to employment and program participation		
	\$ 497,033	\$ 486,341
Total, Goal E: EQUITABLE ACCESS (ADA)		
	\$ 497,033	\$ 486,341
F. Goal: SEC 146, 1993 SALARY INC		
Section 146, 1993 Salary Increase		
	\$ 10,832,078	\$
Grand Total, DEPARTMENT OF HUMAN SERVICES		
	\$ 3,296,387,389	\$ 3,275,181,193
Method of Financing:		
AFDC Payments from General Revenue	\$ 205,848,657	\$ 223,747,951
Medical Assistance Payments from General Revenue	704,469,194	676,230,712
Other General Revenue	252,460,319	265,473,774
Total, General Revenue Fund	\$ 1,162,778,170	\$ 1,165,452,437
Social Workers Fund No. 143, estimated	332,201	330,613
Federal Funds, estimated	2,091,297,413	2,066,825,973
Appropriated Receipts, estimated	4,398,888	4,320,113
Personal Care Facility Licensing Fund No. 670, estimated	116,139	116,139
Earned Federal Funds, estimated	37,464,578	38,135,918
Total, Method of Financing	\$ 3,296,387,389	\$ 3,275,181,193

DEPARTMENT OF HUMAN SERVICES
(Continued)

Schedule of Exempt Positions
Commissioner

\$89,116 \$89,116

Administrative and Support Cost as a Percent of Expenditures 2.3% 2.1%

1. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below or as specified in Article V, Section 106. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

Provided, however, if the federal government fails to grant required prior approval for acquisition of computer equipment included in appropriations for the fiscal year ending August 31, 1993 or if other factors influence the acquisition of such equipment during the 1992-93 biennium, then the amounts shown below may be expended on essential computer acquisitions contingent upon the approval of the Legislative Budget Board.

	1994	1995
a. Lease payments to the Master Equipment Lease Purchase Program (1992/1993)	\$ 12,853,747	\$ 12,741,658
b. Debt Service, Computer Acquisition for Eligibility Determination Workstations	2,720,940	6,149,818
Total, Capital Budget	\$ 15,574,687	\$ 18,891,476
Method of Financing (Capital Budget):		
General Revenue Fund	\$ 8,837,359	\$ 10,376,233
Federal Funds, estimated	6,705,844	8,476,666
Appropriated Receipts	31,484	38,577
Total, Method of Financing (Capital Budget)	\$ 15,574,687	\$ 18,891,476

2. **Educational Stipends Authorized.** Out of the funds appropriated hereinabove the Department of Human Services is authorized to create exempt positions to pay for professional educational stipends which shall be expended only for items such as tuition, books, fees, moving expenses, travel to and from the designated school and living costs (including salaries) while attending school to enable selected Texas Department of Human Services employees to attend accredited schools approved by the department that they might gain professional and technical knowledge and skill necessary for the administration of the department's programs. The monthly exempt salary shall not exceed one step lower than the monthly salary of the classified position held by the employee immediately prior to attending school. Upon return to classified status the employee may be paid up to the same salary step in the same salary group held by the employee immediately prior to attending school.
3. **AFDC Payments and Unexpended Balances.** General revenue funds appropriated for payments for Aid to Families with Dependent Children shall be payable in equal monthly installments on the first day of each calendar month; provided, however, that any balances on hand in these funds may be carried over from month to month during each fiscal year and

DEPARTMENT OF HUMAN SERVICES
(Continued)

from fiscal year 1994 to fiscal year 1995 and such funds are reappropriated to the department for the 1994-95 biennium.

4. **Medical Assistance Payments and Unexpended Balances.** General revenue funds appropriated hereinabove for all Medicaid services shall be payable in equal monthly installments on the first day of each calendar month; provided, however, that any balances on hand in such funds may be carried over from month to month during each fiscal year and from fiscal year 1994 to fiscal year 1995, and such funds are reappropriated to the department for the 1994-95 biennium.
5. **Federal Funds Appropriated.** The appropriations herein made may be used to match federal funds granted to the state for the payment of personal services, travel and other necessary expenses in connection with the administration and operation of a state program of public welfare services. The Texas Department of Human Services is hereby authorized to receive and disburse in accordance with plans acceptable to the responsible federal agency, all federal moneys that are made available (including grants, earnings, allotments, refunds, reimbursements and States Legalization Impact Assistance Grants) to the state for such purposes and all fees authorized by federal law, and to receive, administer, and disburse federal funds for federal programs in accordance with plans agreed upon by the Department of Human Services and the responsible federal agency, and such other activities as come under the authority of the Department of Human Services, and such moneys are appropriated to the specific purpose or purposes for which they are granted or otherwise made available.
6. **Federal, State and Local Funds Appropriated.** The Department of Human Services is hereby authorized to accept all moneys appropriated by the federal or state governments, or by the Commissioners' Court of any county, or by any political subdivisions, as provided by Section 11.003 of the Human Resources Code, as amended, for any purpose including but not limited to the cost of distributing foods to needy people, institutions, school lunch programs, or otherwise as provided by the laws of the United States and the rules and regulations issued pursuant thereto for the distribution of commodities as they now read or as they may be hereafter amended, and to deposit said moneys in the State Treasury. All of said funds are hereby appropriated to the Texas Department of Human Services for the purposes for which they were granted.
7. **Attorney General Representation.** The Attorney General and the Commissioner of Human Services are authorized to jointly select one or more Assistant Attorneys General to be assigned to the Texas Department of Human Services for the purpose of assisting with the legal work of the department and, more particularly, of representing the department in lawsuits. The Assistant Attorneys' General salaries shall be in the amounts to be agreed upon between the Attorney General and the Commissioner and said salaries, travel and other incidental expenses and the salary and expenses of the required clerical staff shall be paid out of any appropriation to the Texas Department of Human Services.
8. **Internal Accounting.** The expenditures of the Texas Department of Human Services shall be allocated to the various funds in accordance with the internal accounting system approved by the State Auditor. At the close of the fiscal year, any remaining unencumbered balance in the Department of Human Services Administration Operating Fund and/or the Department of Human Services Assistance Operating Fund shall be reported to the State Comptroller by funds to which it belongs as determined and designated by the Department of Human Services. Unencumbered balances thus identified with fund balances which revert to the General Revenue Fund under Legislative Acts shall be returned to the appropriate funds as determined and designated by the Department of Human Services.

DEPARTMENT OF HUMAN SERVICES
(Continued)

9. **Reappropriation of Federal and Local Funds.** All funds received by the department from counties, cities, federal agencies and from any other local source and all balances from such sources as of August 31, 1993, are hereby appropriated for the biennium ending August 31, 1995, for the purpose of carrying out the provisions of this Act.
10. **Food Stamp Program Funds Appropriated.** The Texas Department of Human Services is hereby designated as the state agency to establish and operate a statewide Food Stamp Program and to accept all moneys appropriated for this purpose by the federal or state governments, by the Commissioners' Court of any county, by any political subdivisions of the state, or received from any other source as provided for herein and in Chapter 33, Human Resources Code. The Texas Department of Human Services is authorized to expend such funds for welfare purposes, including the cost of distributing foods to needy people, institutions, school lunch programs, or otherwise as provided by the laws of the United States and the rules and regulations issued pursuant thereto, for the establishment and operation of a statewide Food Stamp Program, and for the employment of essential personnel who shall be employed under a merit system basis comparable to the merit rules and regulations applicable to all other personnel of the department.
11. **Annual Report - Professional Fee Exemption.** It is the intent of the Legislature that the Annual Report required by Article V of this Act shall not include professional fees paid for routine or special examinations for the purpose of determining eligibility of individuals for any of the programs administered by the department, professional fees for treatment, services or care for individual recipients, or for providing special needs or appliances for individual recipients, but shall include fees for professional services or consultative services rendered for the general administration of the department.
12. **Advance Payments Revolving Fund.** The State Comptroller shall establish a separate account from which advance payments may be made for programs or projects under which the Texas Department of Human Services has contracted for social services. The Texas Department of Human Services is authorized to establish a revolving fund to be funded from Earned Federal Funds and to make transfers into and out of the separate account from funds appropriated to pay for contracted social services in accordance with the provisions of Human Resources Code, Section 22.002, Subsection g., as amended.
13. **Renovations and Capital Expenditure Account.** The State Comptroller shall establish a separate account from which payments may be made for renovations and capital expenditures. The Department of Human Services is authorized to make transfers into and out of the separate account from appropriated funds to be used to finance renovations and capital expenditures. Any funds on hand in the separate account may be carried forward from fiscal year 1993 to fiscal year 1994 and such funds are reappropriated to the department for the 1994-95 biennium. Funds received through federal participation including depreciation on renovations and capital expenditures may be deposited to the separate account to finance future renovations and capital expenditures. Any funds on hand in the separate account may be carried over from fiscal year 1994 to fiscal year 1995 and such funds are reappropriated to the department for the 1994-95 biennium.
14. **Nursing Home Program Provisions.**
 - a. **Nursing Home Income Eligibility Cap.** It is the intent of the Legislature that the income eligibility cap for nursing home care shall be maintained at the federally maximum level of 300% of Supplemental Security Income (SSI). Further, it is the intent of the Legislature that any cost-of-living increase in social security or other benefits sponsored by the federal government or that any increase in other pension plans should not result in the termination of Title XIX benefits for persons already eligible for

DEPARTMENT OF HUMAN SERVICES
(Continued)

services. The Department of Human Services is hereby authorized to expend general revenue funds to the extent necessary to insure the continuation of benefits to persons eligible.

- b. **Limitation on Per Day Cost of Alternate Care.** - No funds shall be expended by the Department of Human Services for alternate care where the cost per patient per day exceeds the average Medicaid Nursing Facility rate or the patient's nursing facility rate, whichever is greater, except for cases individually exempted by the Board of Human Services.
 - c. **Establishment of a Swing-bed Program.** Out of the funds appropriated above for nursing home vendor payments, the department shall maintain a "swing-bed" program, in accordance with federal regulations and paragraph d., to provide reimbursement for skilled nursing patients who are served in hospital settings in counties with a population of 100,000 or less. If the swing beds are used for more than one 30-day length of stay per year per patient, the hospital must comply with the regulations and standards required for nursing home facilities.
 - d. **Nursing Home Bed Capacity Planning.** The department shall not contract additional medicaid beds in counties where the occupancy rate of available beds for each of the previous six months has been less than 85%. This restriction shall not apply to beds in hospital facilities which are or could be converted to long-term care beds under the federal "swing-bed" regulations, provided the length of stay is limited to 30 days per year and the hospital is located in a county with a population of 100,000 or less.
15. **Accounting of Support Costs.** The State Comptroller shall establish separate accounts from which certain support costs shall be paid. The Department of Human Services is hereby authorized to make transfers into and out of these separate accounts from appropriated funds in order to pay for these expenses in an efficient and effective manner. Only costs not directly attributable to a single program may be budgeted in or paid from these accounts. Items to be budgeted in and paid from these accounts include but are not limited to: postage, occupancy costs, equipment repair, telephones, office printing costs, supplies, freight and transport costs, telephone system costs and salary and travel costs of staff whose function supports several programs.
16. **Appropriation of Fees: Social Work Certification.** All fees collected by the Department of Human Services for the administration of Social Work Certification, as prescribed in Section 50, Human Resources Code, are hereby appropriated to the department. Contingent upon enactment of legislation which transfers administration of social work certification, the appropriations made above for this function are transferred to the new administering agency.
17. **Limitation on Funds for Hospital and Long Term Service Providers.** None of the funds appropriated in this Act may be used as a source of funding for written verification that funds are available to adequately reimburse hospital or long-term service providers for implementation of rules or regulations promulgated by either the Department of Protective and Regulatory Services or Department of Human Services which increase the cost of providing such services, unless the rule or regulation is required by federal statute, rule or regulation.
18. **Appropriation of Receipts: Civil Monetary Damages and Penalties.** Out of funds collected by the department as civil monetary damages and penalties under Human Resources Code Section 32.039, there are appropriated to the department amounts equal to the costs of the investigation and collection proceedings conducted under that section, and any amounts collected as reimbursement for claims paid by the department.

DEPARTMENT OF HUMAN SERVICES
(Continued)

19. **Disposition of State Funds Available Resulting from Federal Match Ratio Change.** In the event the Federal Medical Assistance Percentage should be greater than 63.33% for federal fiscal year 1995, the department shall be authorized to expend the state funds thereby made available only to the extent authorized in writing by the Legislative Budget Board. A copy of such authorization shall be provided to the Comptroller of Public Accounts to assist in monitoring compliance with this provision.
20. **Title XX Fund Reduction.** In the event of a reduction in federal Title XX (Social Services Block Grant) funding, the department should attempt to maintain the affected programs as near to the appropriated levels as possible through use of the department's transfer authority or the allocation of any other available funds. If maintenance of the appropriated levels is not feasible, the department shall reduce all affected programs in proportion to the total amounts appropriated above.
21. **Salaries of Probationary Employees.** It is provided that funds herein appropriated may be expended at rates established by the Department of Human Services for the salaries of employees who are newly hired, transferred or promoted into bona fide administrative or professional jobs and who are participating in a formalized training program in conjunction with their period of probationary service. At the successful conclusion of the probationary period these employees will be moved into regular classified positions.
22. **Board Members' Per Diem.** Out of the funds appropriated for agency administration, the Department of Human Services is hereby authorized to pay board members in accordance with provisions of Article V of this Act.
23. **Transfer of Appropriations.** Out of funds appropriated above, the department shall transfer \$340,000 annually in general revenue to the Legislative Budget Board to finance operations of the Medicaid Analysis and Cost Control Office established in Government Code Section 329.002.
24. **Costs Related to Co-location of Services.** To provide an efficient and effective method of paying common support costs related to co-location of human services as required pursuant to the provisions of V.T.C.S., Art. 4413(505), Sec. 3.08, the Department of Human Services is authorized to receive funds transferred from other agencies for support costs and to deposit those funds into separate accounts for the purpose of paying for costs including, but not limited to, shared postage, occupancy costs, equipment repair, telephones, office printing costs, supplies, freight and transport costs and telephone system costs.
25. **Employment of In-house Legal Counsel.** The Department of Human Services is authorized to hire in-house agency counsel in accordance with Gov. Code Section 402.0211(e)(3).
26. **Appropriation of Fees: Long-Term and Personal Care Facilities.** The Department of Human Services is authorized to collect and expend fees relating to the inspection and certification of long-term and personal care facilities and such fees are hereby appropriated to the Department of Human Services. Any unobligated balances from these fees on hand as of August 31, 1993 in the accounts of the Texas Department of Health are to be transferred to the Department of Human Services and are hereby appropriated to the Department of Human Services for the biennium ending August 31, 1995.
27. **Native American Restitutionary Program.** Contingent upon passage of Senate Bill 927, or similar legislation, the appropriations made for the Native American Restitutionary Program in B.I.2., Strategy: AFDC Grants, of \$136,267 in fiscal year 1994 and \$135,845 in fiscal year 1995 in Oil Overcharge funds are transferred to the General Services Commission for the provision of energy-related assistance.

DEPARTMENT OF HUMAN SERVICES
(Continued)

28. **Frail Elderly Funds Appropriated.** The Texas Department of Human Services is hereby authorized to accept Frail Elderly federal funds. Any funds made available as a result of the receipt of Frail Elderly federal funds may be carried forward from fiscal year 1993 to fiscal year 1994 and such funds are reappropriated to the department for the 1994-95 biennium.
29. **Long Term Care Assessment.** It is the intent of the Legislature that the Texas Department of Human Services use the most recent, minimum data set for patient assessment and the results of such assessment be used in identifying appropriate long term care placement options per individual. It is further the intent of the Legislature that the department counsel each assessed individual and provide to them in writing information regarding all available long term care alternatives, per federal freedom of choice requirements.
30. **Local Office Notification Policy.** Before relocation of an office, execution of a contract for lease of a local Department of Human Services office, or before implementing a change in policy which affects office location, the Legislative members for the respective district must be notified.
31. **Employee Identification.** Out of the funds appropriated above, the Department of Human Services is directed to ensure that all departmental employees who serve clients, in a city with a population of 500,000 or more, wear an identification badge.
32. **ICF-MR Rates.** It is the intent of the Legislature that reimbursement of vocational services for residents of Intermediate Care Facilities for Mental Retardation (ICFs/MR) and recipients of Home and Community-Based Waiver Services (HCS) shall be set to make maximum use of federal matching funds. The Department of Human Services, in conjunction with the Department of Mental Health and Mental Retardation and providers of ICFs/MR and HCS services, shall develop a survey as part of their annual ICFs/MR and HCS cost reports that will accurately capture the cost of providing an array of economical, efficient and effective vocational services including supported employment. Further, it is the intent of the Legislature that these costs become part of the ICFs/MR and HCS reimbursement rate and that rates for ICF-MR vocational services be established on a facility-specific basis. This does not prohibit the Agency from implementing an ICF-MR facility-specific rate system.
33. **JOBS Program.** The Texas Department of Human Services, as the coordinating agency for JOBS Services, shall assist the Central Education Agency, Department of Commerce, Texas Employment Commission, and the Higher Education Coordinating Board in developing intermediate outcome measures appropriate to program objectives for each JOBS program component. The measures should include baseline and end-of-program information on clients (e.g., pretest-posttest design data) and should be entered into the DHS automated data system. DHS will also develop and implement its own intermediate outcome measures. All outcome measures shall be developed no later than April 1, 1994 subject to the review and approval by the State Auditor's Office and the Legislative Budget Office. Implementation shall be no later than September 1, 1994.
34. **Nursing Home Services.** Funds appropriated above in Strategy A.1.4., Nursing Home Payments include amounts to be utilized to provide services to nursing home clients with mental illness, mental retardation, or related conditions. The Department of Human Services shall consult with the Department of Mental Health and Mental Retardation and the Commissioner of Health and Human Services on the most efficient methodology to utilize and may transfer such funds as appropriate or engage in interagency contracts to maximize resources available.

DEPARTMENT OF HUMAN SERVICES
(Continued)

35. **Specialized Services for Nursing Home Clients.** In order to provide for unanticipated events that increase costs associated with providing specialized services for nursing home clients with mental illness, mental retardation, or related conditions, the Department of Human Services is authorized to transfer up to \$6,000,000 in general revenue and \$10,700,000 in federal funds from amounts appropriated for that purpose in Strategy A.1.4., Nursing Home Payments, in the second year of the biennium to the first year of the biennium. At least 15 days prior to any transfer of funds under the provisions of this section, the department will provide in writing to the Governor and the Legislative Budget Board a detailed description of the need for and amount of funds to be transferred. Any unexpended and unobligated balances in appropriations made for this purpose are hereby reappropriated for the same purposes and subject to the same restrictions for the second year of the biennium.
36. **Gang Activity Prevention.** In the funds appropriated for the Strategy C.2.1., Services to Runaway and At-Risk Youth, the Department will fund the Gang Activity Prevention at \$200,000 each fiscal year.
37. **Contingency Appropriation, Nutrition Outreach.** Contingent upon enactment of Senate Bill 714 or similar legislation which establishes a project targeting nutritional education and outreach, there is hereby appropriated in Strategy B.1.3., Nutrition Assistance, from the General Revenue Fund the amounts of \$45,908 in fiscal year 1994 and \$67,639 for fiscal year 1995. It is the intent of the legislature that the general revenue shall be expended only in the event that matching federal funds are available.
38. **Long Term Care Vendor Payments.** The funds appropriated above for Strategy A.1.4., Nursing Home Payments, and for Strategy A.1.5., ICF-MR/RC Payments, are based on amounts estimated to be paid for 23 months of client services during the 1994-95 biennium. Payments for nursing facility and intermediate care facility services incurred in August 1995 which exceed appropriated amounts will be paid from fiscal year 1996 appropriations.
39. **Contingency Appropriation for S.B. 982.** Contingent upon the enactment of S.B. 982, Seventy-third Legislature, Regular Session, or other similar legislation, the Department of Human Services is hereby appropriated the additional administrative penalties collected pursuant to the provisions of that bill in an amount not to exceed \$31,582 for fiscal year 1994 and \$31,582 for fiscal year 1995 for the purpose of implementing the provisions of that Act. The Department of Human Services is hereby authorized to transfer the appropriations herein to the appropriate strategies listed above.

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

For the Years Ending	
August 31, 1994	August 31, 1995

A. Goal: IMPACT MENTAL ILLNESS

To offer an array of services which reduce the impact of mental illness on individuals, families, and communities.

A.1. Objective:

To resolve crises and reduce the impact of mental illness

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

Outcomes:

Percent of Admissions to State Facility Campus Programs Stabilized and Returned to the Community Within 15 Days	30%	28%
Percent of Admissions to State Facility Campus Programs Stabilized and Returned to the Community in Greater than 15 Days but Less than 30 Days	23%	23%
A.1.1. Strategy: COMMUNITY MH SERVICES		
Provide specialized treatment, crisis assessment, and medical services to consumers in the community.	\$ 137,933,306	\$ 141,031,466
Outputs:		
Number of Crisis Resolution Bed-Days	214,134	218,396
Efficiencies:		
Average Cost per Bed-Day	165	165
A.1.2. Strategy: STATE HOSPITAL SERVICES		
Provide specialized treatment, assessment, and medical services in state facility campus programs.	\$ 229,094,888	\$ 230,467,057
Efficiencies:		
Average Cost per Bed-Day	196	192
Explanatory:		
Average Daily Census of Campus-Based Services	3,210	3,210
Average Length of Stay in State Hospitals at Time of Discharge	69	69
A.1.3. Strategy: MH COMMUNITY HOSPITALS		
Provide inpatient and outpatient treatment, crisis, assessment, and medical services to persons served in community hospitals and special projects.	\$ 28,360,553	\$ 28,360,553
Outputs:		
Number of Persons Served in Community Hospitals Who are Later Admitted to a State Facility	257	257
Efficiencies:		
Average Cost per Bed-Day	269	269
Explanatory:		
Average Daily Census of Community Hospitals	313	313
Total, Objective A.1: To resolve crises and reduce the impact of mental illness	\$ 395,388,747	\$ 399,859,076

A.2. Objective:

Obtain skills and support for the mentally ill to live at home

Outcomes:

Percent of Persons Receiving In-Home and Family Support Who Are Admitted to a State Facility Within 2 Years	4.9%	5%
A.2.1. Strategy: MH VOCATIONAL DEVELOPMENT		
Develop and provide vocational and pre-vocational services, training in basic community living skills, and opportunities for social support.	\$ 37,982,308	\$ 37,974,138
Outputs:		
Number of Persons Receiving Psychosocial Rehabilitation Services	15,412	15,412
A.2.2. Strategy: MH CASE MANAGEMENT		
Ensure access to needed services, through case management and other coordination activities.	\$ 17,430,482	\$ 17,430,482
Outputs:		
Number of Persons Receiving Case Management Services	16,542	16,631
A.2.3. Strategy: MH RESIDENTIAL SERVICES		
Provide residential services and housing for mentally ill clients.	\$ 27,603,052	\$ 27,602,924

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

Outputs:

Number of Persons Receiving Supported Housing Services	810	810
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Explanatory:

Number of Persons for Whom Assisted Living Residences are Recommended	2,400	2,400
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A.2.4. Strategy: MH IN-HOME SERVICES

Support individuals and families in the community through direct services and customer-driven in-home and family support.

\$ 4,350,529	\$ 6,077,667
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Outputs:

Number of Persons Receiving In-Home and Family Support	3,734	5,171
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Efficiencies:

Average Grant per Person Receiving In-Home and Family Support	1.165	1.175
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Total, Objective A.2: Obtain skills and support for the mentally ill to live at home

\$ 87,366,371	\$ 89,085,211
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A.3. Objective:

Ensure access to services for underserved mentally ill populations

A.3.1. Strategy: CHILDREN'S MH SERVICES

Develop and provide coordinated services for emotionally disturbed children and their families.

\$ 18,705,040	\$ 22,144,344
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Outputs:

Number of Children Receiving Specialized Treatment Services	6,828	9,214
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Efficiencies:

Average Cost per Child Receiving Specialized Treatment Services	2.500	2.200
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A.3.2. Strategy: SPECIALIZED MH SERVICES

Develop and provide training and specialized services which are sensitive and responsive to cultural needs, and for persons with dual diagnosis (mental illness/substance abuse) and for older adults.

\$ 317,007	\$ 317,007
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Outputs:

Number of Persons Served Deaf/MI Services	4	4
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Total, Objective A.3: Ensure access to services for underserved mentally ill populations

\$ 19,022,047	\$ 22,461,351
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Total, Goal A: IMPACT MENTAL ILLNESS

\$ 501,777,165	\$ 511,405,638
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B. Goal: IMPACT MENTAL RETARDATION

To offer an array of services which reduces the impact of mental retardation on individuals, families, and communities.

B.1. Objective:

Enable mentally retarded individuals to live in the community

Outcomes:

Percent of Persons Who Moved to a Less Restrictive Living Environment	6.55%	6.55%
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Percent of Persons Who Moved to a More Restrictive Living Environment	3.9%	3.9%
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B.1.1. Strategy: MR COMMUNITY RESIDENTIAL

Provide community living options for persons with mental retardation.

\$ 96,832,662	\$ 95,879,064
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DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

Outputs:

Number of Persons Served in TDMHMR Community Residential Services	4,573	4,573
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Efficiencies:

Average Cost Per Person Served in Community Residential Services	21.492	21.492
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B.1.2. Strategy: MR IN-HOME SERVICES

Support individuals and families in their own homes through personal and family assistance, including customer-driven in-home and family support.

	\$ 52,240,049	\$ 54,972,365
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Outputs:

Number of Persons Receiving In-Home and Family Support	3,000	3,370
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Efficiencies:

Average Grant per Person Receiving In-Home and Family Support	2.700	2.700
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B.1.3. Strategy: MR VOCATIONAL DEVELOPMENT

Provide habilitation, vocational and community integration services.

	\$ 75,929,979	\$ 75,182,611
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Outputs:

Number Persons Receiving Habilitation, Vocational, and Community Integration Services	17,747	17,296
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Efficiencies:

Average Cost Per Person Receiving Habilitation, Vocational, and Community Integration Services	4.276	4.276
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B.1.4. Strategy: MR CASE MANAGEMENT

Link persons with the services they need through service coordination activities, including case management.

	\$ 37,660,686	\$ 37,274,139
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Outputs:

Number of Persons Receiving Case Management Services	10,103	10,103
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Total, Objective B.1: Enable mentally retarded individuals to live in the community

	\$ 262,663,376	\$ 263,308,179
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B.2. Objective:

Services for mentally retarded individuals in campus based options

Outcomes:

Percent of Persons Recommended for Continued Placement in State Campus-Based Facilities	79%	79%
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B.2.1. Strategy: STATE SCHOOL SERVICES

Provide state facility campus-based services for clients with mental retardation.

	\$ 308,905,618	\$ 302,055,745
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Outputs:

Number of Persons Who Move From Campus Based Residential Setting to a Community Setting	305	310
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Efficiencies:

Average Cost per Bed-Day	131	131
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Explanatory:

Average Daily Census of Campus-Based Services	6.466	6.156
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B.3. Objective:

Services for mentally retarded individuals in special settings

Outcomes:

Percent of Persons with Mental Retardation Recommended to Leave State Hospitals	20%	20%
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DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

B.3.1. Strategy: NURSING HOME TRANSITION

Provide services and/or alternate placement for persons with mental retardation, mental illness or related conditions who are leaving nursing homes

\$ 6,611,531 \$ 9,672,741

Outputs:

Number of Persons Receiving Targeted Waiver Services

155 227

B.3.2. Strategy: STATE HOSPITAL TRANSITION

Plan and implement services to persons with mental retardation in state hospitals who no longer require psychiatric services.

\$ 8,197,675 \$ 11,197,675

Outputs:

Number of Persons with Mental Retardation Previously Served in State Hospitals and are Receiving State Supported Mental Retardation Services

335 458

Total, Objective B.3: Services for mentally retarded individuals in special settings

\$ 14,809,206 \$ 20,870,416

Total, Goal B: IMPACT MENTAL RETARDATION

\$ 586,378,200 \$ 586,234,340

C. Goal: IMPROVE SYSTEM QUALITY

To promote a comprehensive system that continuously improves the quality of service delivery.

C.1. Objective:

Ensure a system that is equitable, accessible and cost-effective

C.1.1. Strategy: CAPITAL CONSTRUCTION

\$ 15,703,100 \$ U.B.

D. Goal: SEC 146, 1993 SALARY INC

Section 146, 1993 Salary Increase

\$ 19,700,895 \$

Grand Total, DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

\$ 1,123,559,360 \$ 1,097,639,978

Method of Financing:

General Revenue Fund

\$ 1,043,843,282 \$ 1,024,269,725

Federal Funds, estimated

42,330,139 49,730,139

Appropriated Receipts, estimated

10,779,714 10,779,714

Interagency Contracts, estimated

10,903,125 12,860,400

Bond Proceeds - General Obligation Bonds

15,703,100

Total, Method of Financing

\$ 1,123,559,360 \$ 1,097,639,978

Schedule of Exempt Positions

Commissioner (plus house and utilities)

\$93,864 \$93,864

Bond Debt Service

\$ 11,487,337 \$ 13,623,803

Administrative and Support Cost as a Percent of Expenditures

3.3% 3.4%

- I. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "MELPP" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

	<u>1994</u>	<u>1995</u>
a. Lease Payments to the Master Equipment Lease Purchase Program (1992-95)	\$ 7,599,613	\$ 10,456,382
b. Laredo State Center Client Service and Support Building	7,329,700	U.B.
c. Rusk State Hospital Geriatric Facility	2,279,000	U.B.
d. JCAHO/ICF-MR Renovations	<u>6,094,400</u>	<u>U.B.</u>
Total, Capital Budget	<u>\$ 23,302,713</u>	<u>\$ 10,456,382</u>
Method of Financing (Capital Budget):		
General Revenue Fund	\$ 7,599,613	\$ 10,456,382
Bond Proceeds - General Obligation Bonds	<u>15,703,100</u>	<u></u>
Total, Method of Financing (Capital Budget)	<u>\$ 23,302,713</u>	<u>\$ 10,456,382</u>

2. **Transfer Authority.** The Department of Mental Health and Mental Retardation is authorized complete transferability from any strategy to any other strategy.
3. **Food and Utility Transfers.** In order to provide for unanticipated cost increases in food and utilities at the facilities under its jurisdiction the Department of Mental Health and Mental Retardation is authorized to transfer amounts necessary from the second year of the biennium to the first year of the biennium. The Legislative Budget Board and Governor's Office of Budget and Planning shall be notified prior to such transfers.
4. **Unexpended Balances.** Except as otherwise provided, all unexpended and unobligated balances remaining from appropriations for the first year of the biennium to the Department of Mental Health and Mental Retardation are reappropriated to the department for the purpose of complying with the provisions of existing settlement agreements in litigation dealing with residential, non-residential, and community based mental health and mental retardation services. This paragraph does not apply to those unexpended and unobligated balances remaining from appropriations for the first year of the biennium that the department is authorized by this act to retain for specific purposes in the second year of the biennium.
5. **Unobligated Construction Balances.** Any unobligated construction, repairs, or renovation balances from previous appropriations are hereby reappropriated for the identical purposes and subject to the same restrictions for the biennium beginning with the effective date of this Act. Any balances remaining in excess of the requirements of such identical purposes may be allocated by the Board of the Department of Mental Health and Mental Retardation for the purpose of capital improvements with prior notification to the Legislative Budget Board and the Governor's Office of Budget and Planning.
6. **Nursing Home Transition.** In order to provide for unanticipated events that increase costs associated with the Nursing Home Transition strategy, the Department of Mental Health and Mental Retardation is authorized to transfer amounts necessary from amounts appropriated in that strategy in the second year of the biennium to the first year of the biennium. At least 15 days prior to any transfer of funds under the provisions of this section, the department will provide in writing to the Governor and the Legislative Budget Board a detailed description of

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

the need for and amount of funds to be transferred. Any unexpended and unobligated balances in appropriations made for this purpose are hereby reappropriated for the same purposes and subject to the same restrictions for the second year of the biennium.

7. **Collections, Medicaid and Medicare.** The Department of Mental Health and Mental Retardation shall maximize reimbursement under Title XVIII and Title XIX of the Social Security Act. Except as noted below, the department shall identify and budget the state share of Medicaid expenditures. The department shall transfer and/or certify state Medicaid matching funds to the Medicaid single state agency or its designee as necessary. All federal collections from Title XVIII and Title XIX programs shall be deposited to the General Revenue Fund, except as noted below:
 - a. Federal Medicaid reimbursement for community-based Intermediate Care Facility for the Mentally Retarded (ICF-MR) programs operated by community MHMR centers (under local MHMR boards of trustees), state schools, or state centers shall be retained by the provider of services. The state share of Medicaid expenditures for ICF-MR services delivered by community MHMR centers (under local MHMR boards of trustees) or private providers shall be identified and budgeted by the Medicaid single state agency or its designee.
 - b. Federal Medicaid reimbursement for 1915(c) Medicaid waiver programs or other Medicaid waiver programs provided by state schools, state centers, or community MHMR centers shall be retained by the provider of services.
 - c. Federal Medicaid reimbursement received by the department for the provision of Inpatient Psychiatric Services to Persons under Age 21 shall be retained by the department for the sole purpose of expanding the number of Medicare-certified beds in department-operated psychiatric hospitals.
 - d. Federal Medicaid reimbursement for Medicaid-funded outpatient services (including rehabilitation services, case management services, diagnostic and screening services, and any other Medicaid optional services) provided by local or state-operated Mental Health and/or Mental Retardation authorities shall be retained by the provider of the services.
 - e. Fifty percent of the federal Medicaid reimbursement received by the department for the provision of Institutions for Mental Disease services to persons aged 65 years and older shall be retained by the department for the sole purpose of expanding the number of Medicare beds in department-operated psychiatric hospitals.
 - f. Federal Medicare reimbursement received by the department as reimbursement for services to patients in department-operated psychiatric hospitals shall be retained by the department to cover the cost of such services.
 - g. Fifty percent of the federal Medicaid reimbursement for outpatient drugs dispensed by the departments's clinics and outpatient pharmacies may be retained by the department to offset the cost of collections.
 - h. Federal Medicaid reimbursement for Title XIX administrative activities (delegated to the department by the Medicaid single state agency) may be retained by the department.
8. **Transfers of Appropriation - State Owned Hospitals.** The Department of Mental Health and Mental Retardation shall transfer from non-Medicaid state appropriated funds the following amounts to the Department of Health:

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

	<u>1994</u>	<u>1995</u>
State Mental Hospitals	\$ 239,993,785	\$ 183,192,693
Harris County Psychiatric Center	26,336,715	18,982,934
Tarrant County Psychiatric Hospital	<u>4,115,770</u>	<u>3,042,423</u>
	<u>\$ 270,446,270</u>	<u>\$ 205,218,051</u>

The timing and form of such transfers shall be determined by the Comptroller of Public Accounts in consultation with the Department of Health. The Legislative Budget Board is authorized to adjust the amounts of such transfers as necessary to match available federal funds.

9. **Medicaid-funded Institutions for Mental Disease Services.** The Department of Mental Health and Mental Retardation and the Medicaid single state agency or its designee are authorized to extend Medicaid coverage for inpatient psychiatric services to individuals age 65 and over in institutions for mental diseases. The Department of Mental Health and Mental Retardation may certify or transfer funds appropriated for mental health services to the Medicaid single state agency or its designee to implement Medicaid mental health services.
10. **Harris and Tarrant County Medicaid Services.** The Harris County Psychiatric Center and the Tarrant County Psychiatric Hospital shall certify appropriated state funds to the Health and Human Services Commission or its designee for the state share of Medicaid reimbursement for the following services:
 - a. Inpatient psychiatric services for children.
 - b. Inpatient psychiatric services for age 65 and over (Institute for Mental Disease option).

Transfers and/or certification shall also be provided for the Disproportionate Share Hospital reimbursement programs consistent with the Texas Medicaid State Plan.
11. **Hospital Medicare Provisions.** Within appropriations made above, the department shall:
 - a. increase the number of Medicare certified beds available to eligible state hospital patients;
 - b. work with the Texas Medical Foundation to develop consistent criteria for use in its statewide Medicare program; and
 - c. seek dual medical and psychiatric certification for its hospitals.
12. **Medicaid Funding for Special Needs Offenders Served by Community Mental Health and Mental Retardation Authorities.** Within appropriations made above, the Department of Mental Health and Mental Retardation should maximize Medicaid funding for offenders with mental illness and/or mental retardation who receive services from community Mental Health and Mental Retardation Authorities. The department shall accomplish this goal by:
 - a. ensuring that when services are delivered to a Medicaid-eligible special needs offender by means of a state or local interagency contract between an MHMR center and a criminal justice agency, the criminal justice agency's share of the service cost constitutes no more than the state share of the cost of the Medicaid services.
 - b. executing, by September 1, 1993, an interagency agreement with the Department of Criminal Justice (in coordination with the Council on Offenders with Mental Impairments) that standardizes interagency policy on contracts between criminal justice agencies and MHMR authorities. The interagency agreement should specify that both agencies will use Medicaid funding for special needs services whenever possible and that

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

the criminal justice agency's share of the service cost will constitute no more than the state share of the cost of the Medicaid services.

13. **Home and Community Based (HCS) Waiver Program.** It is the intent of the Legislature that the provisions of 1915(c) of the Social Security Act shall be utilized in order to maximize funds available for home and community-based services. The Department of Mental Health and Mental Retardation shall certify and/or transfer appropriated state funds to the Medicaid single state agency or its designee so that it can claim federal financial participation through the provisions of 1915(c), Social Security Act.

The department shall ensure the cost-effectiveness of the HCS program by limiting the average annual HCS expenditure per client to an amount, not to exceed 80% of the average annual per client ICF-MR expenditure. Expenditures for individual clients may exceed this cap as long as the overall average expenditure for HCS clients remains below. The department shall provide estimates of HCS and ICF-MR expense to the Legislative Budget Board as requested.

14. **Residential Services Funded by General Revenue.** The Department of Mental Health and Mental Retardation shall refinance, with Medicaid funding, residential mental retardation services to Medicaid-eligible clients that are currently funded exclusively with general revenue. The department shall accomplish this refinancing through the use of the Home and Community-Based waiver program, or, if necessary, the Intermediate Care Facility for the Mentally Retarded program. The department may transfer and/or certify general revenue funds appropriated for these residential services to the Medicaid single state agency or its designee for this purpose. Beginning June 1, 1993, the department shall submit quarterly reports to the Legislative Budget Board that document the number of residential sites converted to Medicaid funding, the amount of general revenue redirected to the state share of Medicaid funding, and the amount of new federal funds received.
15. **Community Placement.** The department shall continue to develop community alternatives and to place residents of state schools into appropriate community programs in accordance with the department's six-year strategic plan when such placements are determined by department professionals to be in the best interest of the individual. A portion of the funds appropriated for the client's care and treatment in state schools shall be transferred with the client to the community setting.
16. **Rio Grande Accreditation.** The Department of Mental Health and Mental Retardation shall assure that the Rio Grande State Center will apply for and meet the Joint Commission Accreditation for Healthcare Organizations (JCAHO) accreditation standards for mental health services by August 31, 1994.
17. **Provision of Emoluments.** The Commissioner is authorized to provide emoluments for certain positions provided that the provision of such emoluments is necessary to effectively carry out the job responsibilities of the position.
18. **Employee Meals.** Notwithstanding any other provision in this act, the Department of Mental Health and Mental Retardation may provide free meals to employees who are required to eat meals with clients.
19. **Maximum Security Salaries.** As a specific exception to the provisions in Article V of this Act governing salary rates of classified positions, funds are included above for Rusk State Hospital and Vernon State Hospital, to pay those of their employees working in the Skyview Unit of the Department of Criminal Justice or the Maximum Security Units of Vernon State Hospital, a two step increase over those salary rates provided by Article V.

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

20. **Contingency Appropriation for Community MHMR Center Employee Salary Increases.** It is the intent of the Legislature to provide as much parity as practicable between salaries of employees of the Department of Mental Health and Mental Retardation and salaries of employees of local community MHMR centers which are agents of the department and which serve as the local mental health or mental retardation authority. Therefore, in the event the Legislature authorizes an across-the-board salary increase for state employees, and in addition to funds appropriated above, there is hereby appropriated to the department an additional \$1,500,000 each year of the biennium from the General Revenue Fund for each one percent across the board increase granted to state employees. The funds shall be distributed to community MHMR centers based upon the proportionate share of state funding for each community MHMR center. In the event the salary increase is only for a portion of the year, the comptroller shall only allocate the appropriate portion of the total amount authorized above.
21. **Revolving Fund Services.**
- a. **Central Services.** The Department of Mental Health and Mental Retardation may maintain and operate revolving funds on a reimbursable basis for central services that contribute to the efficiency and economy of the facilities under its control and management. All receipts deposited to such central service funds are appropriated for all costs necessary for the operation of these services. Any balances remaining in such funds at the end of a fiscal year are reappropriated for any expenses necessary to the operation of these services for the second year of the biennium. To reimburse the funds from which expenditures are made, the department may make fund transfers from the appropriations of the facilities and agencies which receive the services and supplies, or may submit purchase vouchers through the Office of the State Comptroller.
 - b. **Canteen Services.** Each of the facilities under control and management of the Department of Mental Health and Mental Retardation, except the Central Office, may establish, maintain and operate a canteen for the convenience of its patients. Any balances remaining in each canteen operation fund at the end of each fiscal year, plus all receipts deposited to its credit, are appropriated for all costs necessary for the operation of a canteen. Each of the facilities under control and management of the department that contracts with the Commission for the Blind for the operation of its canteen shall deposit the amount of moneys originally appropriated for its Canteen Operation Fund into the General Revenue Fund. The balance remaining in the facility's Canteen Operation Fund, after the amount originally appropriated is deposited to the General Revenue Fund, shall be deposited to the Benefit Fund created at the facility under the provisions of Health and Safety Code V.T.C.A., § 551.004.
 - c. **Motor Pool Services.** The Department of Mental Health and Mental Retardation is hereby authorized to utilize the services of its motor pool to transfer and deliver the household goods and effects of its employees transferred from one place of employment to another within the department when such service to such employee is deemed to be in the best interest of the state, however, this service shall not be extended to any new employee.
 - d. **United States Surplus Property and Commodities Services.** It is the intent of the Legislature that the funds hereby appropriated for a central supply service are to be used to finance on a reimbursable basis, the obtaining, storing, handling and distribution of the United States surplus property and commodities to various facilities under the jurisdiction of the Department of Mental Health and Mental Retardation.
 - e. **Supply Revolving Fund.** From funds herein appropriated, the Department of Mental Health and Mental Retardation may authorize each facility under its control and

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION (Continued)

management to establish, maintain, and operate on a reimbursable basis, a Supply Revolving Fund to contribute to the efficiency and economy of such facilities.

The department shall approve the amount necessary to implement the revolving funds and shall establish rules to avoid depletion of the funds. To reimburse the revolving funds, facilities may transfer funds from the programs and activities for which supplies are provided.

- f. **Sheltered Workshops.** Any balances remaining in the sheltered workshop funds at the end of each fiscal year, together with receipts deposited to their credit are appropriated for use in the operation of sheltered workshops for the next fiscal year.
22. **Petty Cash Fund.** Each facility under the Department of Mental Health and Mental Retardation may establish a petty cash fund not to exceed \$5,000 out of funds appropriated above. These funds shall be maintained in cash or at a local bank and shall be used by case managers or community services staff only for the purpose of making emergency purchases of medication, basic life support necessities, or other services without which would place clients served by said staff at risk of being placed in a more restrictive environment.
23. **Barber and Cosmetology Services.** The Department of Mental Health and Mental Retardation may charge fees for barber and cosmetology services provided the fees charged are consistent with an individual's ability to pay. These fees are appropriated to the department to offset the cost of providing barber and cosmetology services. The department may also use patient benefit funds to offset the cost of these services for indigent clients.
24. **Children's Heart Institute.** It is the intent of the Legislature that the Texas Department of Mental Health and Mental Retardation (TXMHMR) continue to fund the Children's Heart Institute in an amount not to exceed \$150,000 for each year of the biennium for services to children with mental disabilities who also have congenital heart defects. A contract shall be developed between TXMHMR and the Children's Heart Institute to ensure that appropriate medical services will be provided and that relevant documentation will be submitted to TXMHMR.
25. **Federal Collections Unexpended Balances.** All unexpended balances remaining on August 31, 1993 from federal reimbursement for Medicaid administrative services performed by the Department of Mental Health and Mental Retardation and from Medicare reimbursement due to adjustment in state hospital TEFRA target limitations are hereby reappropriated to the department for the fiscal biennium ending August 31, 1995.
26. **El Paso Psychiatric Center.** It is the intent of the legislature that the Department of Mental Health and Mental Retardation provide the technical assistance, consultation, planning and support necessary to ensure that the El Paso Psychiatric Center is prepared to receive patients within three months following acceptance of the facility from the contractor. The department shall provide an amount not to exceed \$200,000 from funds appropriated above for services planning and project coordination during the biennium. Department staff shall also provide the project with technical assistance in areas including clinical services, automation, administration and finance.

Notwithstanding other provisions of this act, the department is also authorized to use funds appropriated above to purchase furniture and equipment or to hire staff for the El Paso Psychiatric Center if such purchases or expenditures are necessary during the biennium to ensure that the facility is ready to receive patients within three months following acceptance of the facility from the contractor.

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

27. **Laredo State Center.** Bond Proceeds appropriated above include \$7,329,700 for the construction, purchase, acquisition, or renovation of a Client Service and Support Building which will be a part of the Department of Mental Health and Mental Retardation's Laredo State Center and to furnish and equip the building. If no construction bonds are appropriated to the department, funding will be provided from funds remaining in uncommitted construction appropriations made to the department the previous biennia.
28. **Geriatric Project.** Bond Proceeds appropriated above include \$2,279,000 for the renovations of a geriatric facility at Rusk State Hospital. This funding will provide for the renovations on a 60 year old building, 31,524 square feet in size. If no construction bonds are appropriated to the Department, funding will be provided from funds remaining in construction appropriations made to the Department the previous biennia.
29. **Mental Retardation Community Residential.** All state school group homes funded under the 1987 bond program must seek Intermediate Care Facility certification and funding. No funds may be expended for the construction, purchase, lease or rental of a group home project, which was undertaken after September 1, 1994, if the group home site is found to be in violation of site-selection criteria. The Department of Mental Health and Mental Retardation must complete a state tax status report of all companies bidding on a group home construction or renovation project prior to awarding the contract and also upon completion of the project. All state tax delinquencies discovered during the search must be cleared before a contract can be awarded and before final payment on the project can be made.
30. **Community Residential Services for the Mentally Retarded.** In order to utilize existing resources in a cost effective and efficient manner, it is the intent of the Legislature that the Department of Mental Health and Mental Retardation take into account the availability of existing beds and facilities in individual service areas when developing and allocating beds. The Department should provide assurances that all individuals seeking residential services are informed of all service options including waiver services and large and small congregate living arrangements.
31. **State School Salaries.** Notwithstanding other provisions, regular employees at Fort Worth State School and Travis State School who continue their employment as long as needed to deliver services are entitled to either: (a) a comparable position at another TXMHMR facility, with payment of travel expenses and time off as required to visit prospective new job sites within the system prior to acceptance of new jobs, and reimbursement of moving expenses up to \$1,500 to transfer to other TXMHMR facilities during designated periods of movement; or (b) paid administrative leave for two months, plus one week of paid leave for each full year of service with TXMHMR.
32. **Transfer of Employee Benefits.** To ensure the continuity of quality services to clients and facilitate placement of employees of Fort Worth and Travis State Schools closed pursuant to the *Lels* settlement agreement, the Department of Mental Health and Mental Retardation shall certify to the Legislative Budget Board the names and salary amounts of such employees transferred to community MHMR centers. The Department of Mental Health and Mental Retardation shall certify to the Legislative Budget Board the cost of continuing health insurance and retirement benefits at the affected community MHMR centers. Upon approval of the Legislative Budget Board, the Comptroller of Public Accounts shall transfer sufficient funds from appropriations for state contributions for employee insurance and retirement benefits made to the Employees Retirement System to the department for allocation to community MHMR centers for reimbursement of health insurance and retirement benefits of transferred employees. However, such funds per transferred employee shall not exceed the amount appropriated per state employee for Fiscal Year 1994.

DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION
(Continued)

33. **Transfer of services to Community MHMR Centers.** The Department of Mental Health and Mental Retardation shall notify the Governor and the Legislative Budget prior to the transfer of programs or services by the department to community MHMR centers. The department shall conduct an evaluation of the cost of providing the service and benefit of such transfer of service, in accordance with methodology established by the Legislative Budget Board. The Legislative Budget Board shall approve the cost of service and amounts to be transferred by the department to the community MHMR centers. It is the intent of the Legislature that Rusk State Hospital be fully operational during the 1994-95 biennium and that its catchment area not be reduced.
34. **Contingency Interagency Contract.** In the event that legislation is not enacted which eliminates the statutory requirement for the Department of Mental Health and Mental Retardation to receive persons committed for substance abuse on a voluntary or involuntary basis, the Department shall, through interagency contract, contract with the Commission on Alcohol and Drug Abuse to provide services in the strategy, A.1.2., Chemical Dependency Treatment Services, \$7,600,000 in fiscal year 1994 and \$7,600,000 in fiscal year 1995.
35. **Community Mental Health Services.** It is the intent of the legislature that \$4.0 million of the funds provided in Strategy A.1.1., Community Mental Health Services shall be expended in those areas which underutilize the TXMHMR state hospitals and state school proportional to the population within their mental health authority or mental retardation authority regions.
36. **Clozapine Expenditures.** The Department of Mental Health and Mental Retardation shall submit a report by November 1st of each fiscal year detailing expenditures for clozapine in a manner as determined by the Legislative Budget Board.
37. **Maintenance of Austin State Hospital and Central Administrative Offices.** None of the funds appropriated above may be expended by the Department of Mental Health and Mental Retardation for maintenance of the Austin State Hospital or the central administrative offices in Austin except through interagency contract with the General Services Commission in an annual amount not to exceed funds appropriated for maintenance of those facilities in fiscal 1993. Employees of the Department of MHMR performing tasks covered by the contract before its effective date shall be transferred to the General Services Commission without changes in salary or accrued benefits to fill any similar positions necessary to perform the contract, given that any positions or subcontracts employing persons with disabilities receive special consideration.

JUVENILE PROBATION COMMISSION

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: LOCAL JUVENILE JUSTICE		
To develop a comprehensive, coordinated, community-based juvenile justice system for troubled children and their families throughout the State of Texas by providing funding, technical assistance, and training in partnership with juvenile boards and probation departments in order to provide maximum efficiency and effectiveness.		
A.1. Objective:		
Increase rate of successful completion of probation		
Outcomes:		
Rate of Successful Terminations of Probation	84%	84%
A.1.1. Strategy: BASIC PROBATION		
Provide funding to juvenile probation departments for the provision of basic juvenile probation services, including delinquency prevention, informal adjustment, and court-ordered probation.		
	\$ 17,293,558	\$ 17,293,558
Outputs:		
Number of Counties Contracting for State Aid	254	254
Efficiencies:		
State Aid Cost per Juvenile Served	143.2	136.7
A.1.2. Strategy: TRAINING AND ASSISTANCE		
Provide training and technical assistance to juvenile boards and departments on issues concerning fiscal management, case management, delinquency prevention, and TJPC standards compliance for the provision of basic probation services; and monitor for compliance with TJPC standards.		
	\$ 781,357	\$ 781,357
Outputs:		
Number of Professionals Trained for the Provision of Basic Probation	2,700	2,813
Total, Objective A.1: Increase rate of successful completion of probation		
	\$ 18,074,915	\$ 18,074,915
A.2. Objective:		
Increase percentage of delinquent referrals served		
Outcomes:		
Percentage of Delinquent Referrals Served Through Community Corrections Programs Funded by TJPC	4%	4%
Percentage of Delinquent Referrals Committed to TYC	2.5%	2.4%
Rate of Successful Completion of Intensive Supervision Probation	65%	65%
Rate of Successful Completion of Direct Diversion Program	60%	60%
A.2.1. Strategy: COMMUNITY CORRECTIONS		
Provide funding to juvenile boards and departments for diversion of juveniles from commitment to the Texas Youth Commission and meet legislatively-mandated performance measures for intensive residential and non-residential diversionary services.		
	\$ 20,750,000	\$ 20,750,000
Outputs:		
Average Daily Population of Intensive Supervision Probation	1,300	1,190
Average Daily Population of Direct Diversion Program	312	278

JUVENILE PROBATION COMMISSION (Continued)

Efficiencies:

Cost Per Day Per Youth for Intensive Supervision Probation	13.2	14.5
Cost Per Day Per Youth for Direct Diversion Program	82	92

A.2.2. Strategy: TRAINING AND ASSISTANCE

Provide training and technical assistance to juvenile boards and probation departments on issues or topics relevant to community-based corrections, including case management, program planning, and delinquency prevention; and monitor for compliance with TJPC standards and applicable federal regulations.

	<u>\$ 2,821,408</u>	<u>\$ 2,821,772</u>
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Outputs:

Number of Professionals Trained for Community Corrections Programs	200	200
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Total, Objective A.2: Increase percentage of delinquent referrals served

	<u>\$ 23,571,408</u>	<u>\$ 23,571,772</u>
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Total, Goal A: LOCAL JUVENILE JUSTICE

	<u>\$ 41,646,323</u>	<u>\$ 41,646,687</u>
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B. Goal: SEC 146, 1993 SALARY INC

Section 146, 1993 Salary Increase

	<u>\$ 24,554</u>	<u>\$</u>
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Grand Total, JUVENILE PROBATION COMMISSION

	<u>\$ 41,670,877</u>	<u>\$ 41,646,687</u>
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Method of Financing:

General Revenue Fund	\$ 39,021,933	\$ 38,997,379
Federal Funds	2,598,944	2,599,308
Juvenile Probation Diversion Fund No. 580	<u>50,000</u>	<u>50,000</u>

Total, Method of Financing

	<u>\$ 41,670,877</u>	<u>\$ 41,646,687</u>
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Schedule of Exempt Positions

Executive Director	\$64,609	\$64,609
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Administrative and Support Cost as a Percent of Expenditures	4.3%	4.3%
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1. **Appropriation, Juvenile Diversion.** All revenue collected as court costs pursuant to V.T.C.A., Family Code, Section 54.0411, and deposited into the Juvenile Probation Diversion Fund No. 580, and any fund balances in Fund No. 580 on the effective date of this act, are hereby appropriated to the Juvenile Probation Commission for the purpose of implementing Section 54.0411.

2. **Restriction, State Aid.**

- a. None of the funds appropriated above in A.1.1. Strategy: Basic Probation, and allocated to local juvenile probation boards, shall be expended for salaries or expenses of juvenile board members.
- b. No juvenile probation department that denies the Texas Youth Commission access to its detention facilities for short-term placements of youth who meet legal requirements for detention, shall receive state aid from the Juvenile Probation Commission.

JUVENILE PROBATION COMMISSION (Continued)

3. **Educational Needs Assessment.** It is the intent of the Legislature that an integral part of any formal disposition be an assessment of educational needs of the juvenile, and that obtaining appropriate educational services be a priority goal of all juvenile probation dispositions.
4. **Challenge Grants.** Funds appropriated in A.1.1. Strategy: Basic Probation, may be expended for children in the jurisdiction of the juvenile court who are also either abused, neglected, emotionally disturbed, mentally ill, or mentally retarded. In awarding this money, the Juvenile Probation Commission shall require a local contribution for the placement of these children at least equal to the amount of state money awarded. The Juvenile Probation Commission shall give priority in this program to three counties with populations of over 500,000, three counties with populations of between 200,000 and 500,000 and three counties with populations below 200,000. Challenge Grant funds may be used for non-residential services.
5. **Federal Foster Care Claims.** Within the appropriations made above, the Department of Human Services, the Texas Youth Commission and the Juvenile Probation Commission shall document possible foster care claims for children in juvenile justice programs and maintain an interagency agreement to implement strategies and responsibilities necessary to claim additional federal foster care funding; and consult with juvenile officials from other state and national experts in designing better foster care funding initiatives. These initiatives should include, but not be limited to, claiming federal foster care reimbursement for child welfare training contracts and developing financing for family preservation programs.
6. **Appropriation of Federal Title IV-E Receipts.** The provisions of Title IV-E of the Social Security Act shall be used in order to increase funds available for juvenile justice services. The Juvenile Probation Commission shall certify or transfer state funds to the Department of Protective and Regulatory Services so that federal financial participation can be claimed for Title IV-E services provided by counties. Such federal receipts are appropriated to the Juvenile Probation Commission for the purpose of reimbursing counties for services provided to eligible children. It is the intent of the Legislature that any reimbursement from the Title IV-E Program be used to increase services to Title IV-E eligible children.
7. **Residential Facilities.** Juvenile Boards may use funds appropriated in Strategy A.1.1., Basic Probation, and Strategy A.2.1., Community Corrections, to lease, contract for, or reserve bed space with public and private residential facilities for the purpose of diverting juveniles from commitment to the Texas Youth Commission.
8. **Expenditure Limitation.** Out of the funds appropriated above in Strategy A.1.1., Basic Probation, the amount of \$3.0 million each year may only be expended pursuant to the local matching requirements of the Challenge Grant Program. The commission shall target the expenditure of these funds toward provision of non-residential services to at-risk, gang-involved, or chemical dependent youth.

DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: PROTECTIVE SERVICES		
To protect children, elderly adults, persons with disabilities, and victims of family violence from abuse, neglect, and/or exploitation through development and efficient management of an integrated service delivery system.		
A.1. Objective:		
Investigate reports of suspected child abuse/neglect		
Outcomes:		
Ratio of the Number of Children Who Were Investigated for Abuse/ Neglect to the Number of Children Reported to be at Risk of Abuse/ Neglect	63.3%	63.3%
Percent of Children Needing Protective Services Who Receive Direct Services From CPS Staff	51.6%	56.5%
A.1.1. Strategy: CPS INVESTIGATIONS		
Provide prompt investigations/assessment to children reported to be at risk of abuse/neglect as defined in the Texas Family Code.		
	\$ 70,717,920	\$ 79,231,773
Outputs:		
Annual Number of Completed CPS Investigations of Abuse/ Neglect	135,586	153,407
Efficiencies:		
Average CPS Caseload per Worker	28.2	29.5
Average Cost per CPS Investigation	522	516
A.1.2. Strategy: CPS INTAKES		
Provide a comprehensive and consistent system with automation support for receiving reports of children suspected to be at risk of abuse/ neglect and assign for investigation those reports that appear to meet the Texas Family Code definition of child abuse/neglect.		
	\$ 8,174,586	\$ 7,874,586
Outputs:		
Annual Number of CPS Intake Calls Received by Child Protective Service Staff	644,820	729,573
Explanatory:		
Annual Number of Reports of Alleged Child Abuse and Neglect	214,940	243,191
Total, Objective A.1: Investigate reports of suspected child abuse/neglect		
	\$ 78,892,506	\$ 87,106,359
A.2. Objective:		
Provide services to children to assure safety of children in need		
Outcomes:		
Percent of Children Found Through an Assessment/Investigation to be in Need of Protection Who Received Services Beyond Investigation	57.7%	60.8%
A.2.1. Strategy: CPS IN-HOME SERVICES		
Provide services to reduce abuse and neglect, provide for the child's safety, and reduce the need for out-of-home placement.		
	\$ 35,021,597	\$ 39,221,597

DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES
(Continued)

Outputs:

Number of Children Receiving Protective Services in Addition to Investigation	51,631	61,620
Number of Families/Children Receiving Purchased Supportive and/or Rehabilitative Services While in Family Preservation or Family Reunification	8,314	10,829

A.3. Objective:

Provide effective substitute services to children in need

Outcomes:

Percentage of Children for Whom the Permanency Plan was Achieved within 24 Months	90%	76.5%
Ratio of Children Needing Out-of-Home Placements to the Number of Foster Home Spaces Available	77%	82.5%
Percentage of Children Receiving Purchased Supportive and/or Rehabilitative Service While in Substitute Care	25.1%	25.1%

A.3.1. Strategy: CPS SUBSTITUTE CARE

Develop and support sufficient resources to ensure that children in substitute care are provided stable, appropriate placements.

\$	78,397,291	\$	78,397,291
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Outputs:

Number of Available Foster Home Placements	3,609	2,918
Number of Available Adoptive Home Placements	1,241	1,338

Efficiencies:

Cost per Foster Home Placement Developed (Beds)	587	619
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A.3.2. Strategy: CPS PURCHASED SERVICES

Purchase appropriate services for families and children who need services to facilitate the achievement of a permanency plan.

\$	22,586,392	\$	22,586,392
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Outputs:

Number of Children in Substitute Care Receiving a Purchased Supportive and/or Rehabilitative Service	3,359	3,800
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A.3.3. Strategy: SUBSTITUTE CARE PAYMENTS

Provide funding for substitute care services for children who need services.

\$	178,254,668	\$	190,772,668
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Outputs:

Annual Number of Children in Substitute Care	21,572	24,458
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A.3.4. Strategy: ALTERNATE TREATMENT-YOUTH

Provide alternate treatment for youth through contract with Hope Center for Youth.

\$	1,869,578	\$	1,869,578
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Outputs:

Number of Children Served by Hope Center for Youth Monthly (Non-TDPRS Children)	147	147
---	-----	-----

Total, Objective A.3: Provide effective substitute services to children in need

\$	281,107,929	\$	293,625,929
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A.4. Objective:

Provide protective services to adult victims of maltreatment

Outcomes:

Percentage of Reports Found to be Valid, or in Need of APS	80.05%	80.05%
APS Case Recidivism	16.7%	16.7%

A.4.1. Strategy: APS INVESTIGATIONS

Assure rapid and consistent response to reports of abuse, neglect, and exploitation.

\$	6,644,218	\$	7,844,218
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Outputs:

Annual Number of APS Investigations	35,711	38,568
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DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES
(Continued)

Efficiencies:

Cost per APS Investigation	186	203
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A.4.2. Strategy: APS SERVICES

Provide direct and purchased services to alleviate and prevent the recurrence of maltreatment or neglect of vulnerable adults.

\$ 15,906,524	\$ 15,906,524
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Outputs:

Annual Average of Monthly Number of Cases Provided
Service

10.099	9.993
--------	-------

Efficiencies:

Average APS Caseload Per Worker

35	35
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A.4.3. Strategy: MHMR INVESTIGATIONS

Assure rapid and consistent response to and investigation of reports of abuse/neglect in MHMR facilities and other facilities they regulate; provide funding and trend analysis to MHMR administration to facilitate overall management and resolution of cases

\$ 4,162,827	\$ 1,662,827 & U.B.
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Outputs:

Annual Number of Investigations in MHMR Facilities and
Outreach Programs

4,714	5,280
-------	-------

Annual Number of Investigations in Community Centers
Reviewed by Staff

431	436
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Annual Number of Investigations in Private Psychiatric
Hospitals Reviewed by Staff

328	389
-----	-----

Total, Objective A.4: Provide protective services
to adult victims of maltreatment

\$ 26,713,569	\$ 25,413,569
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A.5. Objective:

Investigate reports of abuse of adults in nursing homes & care centers

A.5.1. Strategy: LTC INVESTIGATIONS

Assure rapid and consistent response to and investigation of reports of abuse/neglect in long-term care facilities

\$ 7,330,808	\$ 7,330,808
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Outputs:

Annual Number Investigations in Long Term Care Facilities
(Nursing Homes, Personal Care Homes, Room and Board
Homes, Etc.)

12,625	12,825
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A.6. Objective:

Ensure that health care facilities meet state and federal regulations

A.6.1. Strategy: HEALTH CARE LICENSING

Implement cost-effective, efficient, consistent plan to license/ certify and provide technical assistance to health care facilities

\$ 8,268,135	\$ 8,268,135
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Outputs:

Number of Complaint Investigations Conducted

775	775
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A.7. Objective:

Regulate child care facilities to reduce risk of injury/abuse/disease

A.7.1. Strategy: CHILD CARE LICENSING

Issue licenses, certification, and registration to applicants who meet the requirements following agency-promulgated standards

\$ 3,902,660	\$ 3,902,660
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DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES
(Continued)

Outputs:		
Number of Licensed Facilities	8,679	9,025
Number of Registered Family Homes (RFH)	13,904	14,182
A.7.2. Strategy: CHILD CARE INVESTIGATIONS		
Investigate all complaints alleging conditions harmful to children and violations of regulations or the law	\$ 3,309,076	\$ 3,309,076
Outputs:		
Number of Complaints Received	8,729	8,890
A.7.3. Strategy: CHILD CARE INSPECTIONS		
Conduct inspections of child care facilities to ensure compliance with regulations, taking appropriate action to enforce the requirements and to improve the level of care provided	\$ 8,387,786	\$ 8,387,786
Outputs:		
Number of Child Care Facility Inspections	33,135	32,510
Number of Violations Found in Child Care Facilities	104,962	111,052
Total, Objective A.7: Regulate child care facilities to reduce risk of injury/abuse/disease	\$ 15,599,522	\$ 15,599,522
A.8. Objective:		
Protective services automation initiative		
A.8.1. Strategy: AUTOMATION INITIATIVE		
Protective services automation initiative	\$ 25,000,000	\$ U.B.
Total, Goal A: PROTECTIVE SERVICES	\$ 477,934,066	\$ 476,565,919
B. Goal: SEC 146, 1993 SALARY INC		
Section 146, 1993 Salary Increase	\$ 5,789,245	\$
Grand Total, DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES	\$ 483,723,311	\$ 476,565,919
Method of Financing:		
General Revenue Fund	\$ 295,391,282	\$ 285,515,846
Federal Funds, estimated	185,250,395	187,968,439
Appropriated Receipts, estimated	3,081,634	3,081,634
Total, Method of Financing	\$ 483,723,311	\$ 476,565,919
Schedule of Exempt Positions		
Executive Director	\$84,975	\$84,975

Administrative and Support Cost as a Percent of Expenditures	4.6%	4.6%
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1. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES
(Continued)

	<u>1994</u>	<u>1995</u>
Out of the General Revenue Fund:		
a. Lease Payments to the Master Equipment Lease Purchase Program (1992-93)	\$ 3,600,000	\$ U.B.
b. Automation Initiative, Hardware and Software	<u>14,900,000</u>	<u>U.B.</u>
Total, Capital Budget	<u>\$ 18,500,000</u>	<u>\$ U.B.</u>

2. Substitute Care Provisions.

a. **Substitute Care Payments.** Any sums herein appropriated for substitute care may be expended by the department for any expenses incidental to the substitute care strategy, including but not limited to salaries, professional fees and services, travel expense, consumable supplies and materials, and current and recurring operating expense. Any general revenue balances on hand may be carried over from fiscal year 1994 to fiscal year 1995 and such funds are reappropriated to the department for the 1994-95 biennium.

b. **Permanency Goals.** In order to comply with P.L. 96-272, it is the intent of the Legislature that the Department of Protective and Regulatory Services actively seek permanent homes for the children who are in the department's substitute care program for long periods. To this end, the department shall seek to limit the number of children under the department's responsibility who are in substitute care for a period longer than 24 months. For fiscal years 1994-95, the goal for such children is forty-five percent (45%) of the total number of children in the department's substitute care program at any time during the year.

Further, it is the intent of the Legislature that whenever possible, the department shall utilize state and/or federal funds currently being expended for substitute care to cover the cost of assuring permanent homes where appropriate for foster children.

3. **Appropriation of Fees: Child Care Administrators Licensure.** All fees collected by the department in its examination and/or licensure of administrators of child-care institutions, as prescribed by Chapter 43, Human Resources Code, as amended, shall be retained by the department to partially offset the state cost of the operation of these functions and are hereby appropriated to the department.

4. **Appropriation of Receipts: Social Studies.** All fees awarded to the Department of Protective and Regulatory Services as costs for social studies under Sections 11.12 and 11.18 of the Family Code are appropriated to the department and may be used for child protection purposes. Any balances on hand in these funds as of August 31, 1993 are appropriated to the department for the 1994-95 biennium. Any balances on hand in these funds on August 31, 1994 may be carried forward to fiscal year 1995.

5. **Limitation on Expenditures for Conservatorship Suits.** To the extent allowed by federal regulation, federal funds may be used by the department in conjunction with funds provided by counties with which the department has child welfare contracts, to pay for legal representation for children or their parents in suits in which the department is seeking to be named conservator. No General Revenue funds appropriated to the department may be used to make such payments.

DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES
(Continued)

6. **Local Participation.** It is the intent of the Legislature that the Department of Protective and Regulatory Services shall take affirmative action to encourage positive local participation in specific agency programs through cash appropriations, in-kind services, or in such other form as may be acceptable to both the department and a contributing local entity. The department shall structure its accounting methods in such a way as to not export local supplements or benefits to specific programs from within the local jurisdiction, and shall not decrease funding or services in a program, either in anticipation of or upon receipt of local supplements or benefits, except by express agreement of the local entity.
7. **Attorney General Representation.** The Attorney General and the Department of Protective and Regulatory Services are authorized to jointly select one or more Assistant Attorneys General to be assigned to the department for the purpose of assisting with the legal work of the department and, more particularly, of representing the department in lawsuits. The Assistant Attorneys' General salaries shall be in the amounts to be agreed upon between the Attorney General and the department and said salaries, travel and other incidental expenses and the salary and expenses of the required clerical staff shall be paid out of any appropriation to the department.
8. **Educational Stipends Authorized.** Out of the funds appropriated above the Department of Protective and Regulatory Services is authorized to create exempt positions to pay for professional educational stipends which shall be expended only for items such as tuition, books, fees, moving expenses, travel to and from the designated school and living costs (including salaries) while attending school to enable selected department employees to attend accredited schools approved by the department that they might gain professional and technical knowledge and skill necessary for the administration of the department's programs. The monthly exempt salary shall not exceed one step lower than the monthly salary of the classified position held by the employee immediately prior to attending school. Upon return to classified status the employee may be paid up to the same salary step in the same salary group held by the employee immediately prior to attending school.
9. **Limitation on Funds for Hospital and Long Term Service Providers.** None of the funds appropriated in this act may be used for written verification that funds are available to adequately reimburse hospital or long-term service providers for implementation of rules or regulations promulgated by either the Department of Protective and Regulatory Services or the Department of Human Services which increase the cost of providing such services, unless the rule or regulation is required by federal statute, rule or regulation.
10. **Title XX Fund Reduction.** In the event of a reduction in federal Title XX (Social Services Block Grant) funding, the department should attempt to maintain the affected programs as near to the appropriated levels as possible through use of the department's transfer authority or the allocation of any other available funds. If maintenance of the appropriated levels is not feasible, the department shall reduce all affected programs in proportion to the total amounts appropriated above.
11. **Salaries of Probationary Employees.** It is provided that funds herein appropriated may be expended at rates established by the department for the salaries of employees who are newly hired, transferred or promoted into bona fide administrative or professional jobs and who are participating in a formalized training program in conjunction with their period of probationary service. At the successful conclusion of the probationary period these employees will be moved into regular classified positions.
12. **Internal Accounting.** The expenditures of the Department of Protective and Regulatory Services shall be allocated to the various funds in accordance with the internal accounting system approved by the State Auditor. At the close of the fiscal year, any remaining

DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES

(Continued)

unencumbered balance in any Department of Protective and Regulatory Services Operating Fund shall be reported to the State Comptroller by fund to which it belongs as determined and designated by the Department of Protective and Regulatory Services.

13. **Reappropriation of Federal and Local Funds.** All funds received by the department from counties, cities, state and/or federal agencies and from any other local source and all balances from such sources as of August 31, 1993, are hereby appropriated for the biennium ending August 31, 1995, for the purpose of carrying out the provisions of this Act.
14. **Annual Report - Professional Fee Exemption.** It is the intent of the Legislature that the Annual Report required by Article V of this Act shall not include professional fees paid for routine or special examinations for the purpose of determining eligibility of individuals for any of the programs administered by the department, professional fees for treatment, services or care for individual recipients, or for providing special needs or appliances for individual recipients, but shall include fees for professional services or consultative services rendered for the general administration of the department.
15. **Disposition of State Funds Available Resulting from Federal Match Ratio Change.** In the event the Federal Medical Assistance Percentage should be greater than 63.33% for federal fiscal year 1995, the department shall be authorized to expend the state funds thereby made available only to the extent authorized in writing by the Legislative Budget Board. A copy of such authorization shall be provided to the Comptroller of Public Accounts to assist in monitoring compliance with this provision.
16. **Accounting of Support Costs.** The State Comptroller shall establish separate accounts from which certain support costs shall be paid. The Department of Protective and Regulatory Services is hereby authorized to make transfers into and out of these separate accounts from appropriated funds in order to pay for these expenses in an efficient and effective manner. Only costs not directly attributable to a single program may be budgeted in or paid from these accounts. Items to be budgeted in and paid from these accounts include but are not limited to: postage, occupancy costs, equipment repair, telephones, office printing costs, supplies, freight and transport costs, telephone system costs, salary and travel costs of staff whose function support several programs.
17. **Appropriation of Receipts: Civil Monetary Damages and Penalties.** Out of funds collected by the department as civil monetary damages and penalties under Human Resources Code Section 32.039, there are appropriated to the department amounts equal to the costs of the investigation and collection proceedings conducted under that section, and any amounts collected as reimbursement for claims paid by the department.
18. **Renovations and Capital Expenditure Account.** The State Comptroller shall establish a separate account from which payments may be made for renovations and capital expenditures. The Department of Protective and Regulatory Services is authorized to make transfers into and out of the separate account from appropriated funds to be used to finance renovations and capital expenditures. Any funds on hand in the separate account may be carried forward from appropriated funds to be used to finance renovations and capital expenditures. Funds received through federal participation including depreciation on renovations and capital expenditures may be deposited to the separate account to finance future renovations and capital expenditures. Any funds on hand in the separate account may be carried over from fiscal year 1994 to fiscal year 1995 and such funds are reappropriated to the department for the 1994-95 biennium.
19. **Tertiary Prevention of Child Abuse Programs.** From the amounts appropriated to the Department of Protective and Regulatory Services in Strategy A.2.1., CPS In-Home Services,

DEPARTMENT OF PROTECTIVE AND REGULATORY SERVICES
(Continued)

the department shall allocate not less than \$1 million each fiscal year of the biennium for family outreach programs and not less than \$115,000 each fiscal year of the biennium for continuation of a statewide network of community-based, volunteer-driven programs for prevention, intervention, and aftercare services for abused children.

20. **Board Members' Per Diem.** Out of the funds appropriated above the Department of Protective and Regulatory Services is hereby authorized to pay board members in accordance with provisions of Article V of this Act.
21. **Automation Contingency.** Funds appropriated above for the Protective Services Automation Initiative are made contingent upon the hiring of a qualified project manager prior to September 1, 1993.
22. **Automation Report.** The Department shall report to the Legislative Budget Board on a quarterly basis concerning the implementation of the Protective Services Automation Initiative. The report shall contain detailed expenditure information in a format prescribed by the Legislative Budget Board. As part of the report, the Department shall also include information detailing the time frame for full implementation of the project and whether or not the Department is on schedule for full implementation. The Department shall also include an assessment of service improvements that have occurred as a result of the implementation of the automation initiative.
23. **Federal Funds Appropriated.** The appropriations herein made may be used to match federal funds granted to the state for the payment of personal services, travel and other necessary expenses in connection with the administration and operation of a state program of public welfare services. The Department of Protective and Regulatory Services is hereby authorized to receive and disburse in accordance with plans acceptable to the responsible federal agency, all federal moneys that are made available (including grants, earnings, allotments, refunds, reimbursements and States Legalization Impact Assistance Grants) to the state for such purposes and all fees authorized by federal law, and to receive, administer, and disburse federal funds for federal programs in accordance with plans agreed upon by the Department of Protective and Regulatory Services and the responsible federal agency, and such other activities as come under the authority of the Department of Protective and Regulatory Services, and such moneys are appropriated to the specific purpose or purposes for which they are granted or otherwise made available.

REHABILITATION COMMISSION

For the Years Ending	
August 31, 1994	August 31, 1995

A. Goal: SERVICE DELIVERY SYSTEM

We will provide an integrated system of service delivery options which promotes consumer involvement in the delivery of services leading to independence, productivity, and employment of people with disabilities.

A.1. Objective:

Provide vocational rehabilitation services to people with disabilities

REHABILITATION COMMISSION (Continued)

Outcomes:

Percent of Eligible People With Disabilities Placed in Competitive Employment or Other Appropriate Setting Who are Served by Vocational Rehabilitation Services

60% 60%

Percent of Employed Rehabilitants Earning at Least Minimum Wage

65% 65%

Percent of People With Disabilities in Need of Vocational Rehabilitation Services Receiving Services

7.6% 7.9%

A.1.1. Strategy: REHABILITATION SERVICES

Rehabilitate and place in competitive employment or other appropriate settings, people with disabilities through time-limited, consumer, and counselor supported services.

\$ 148,355,437 \$ 160,722,178

Outputs:

Eligible Clients Provided Vocational Rehabilitation Services

69,777 72,694

Eligible Clients Rehabilitated and Employed

17,265 17,730

Efficiencies:

Cost Per Client Rehabilitated and Employed

8.564 9.020

A.1.2. Strategy: SUPPORTED EMPLOYMENT

Provide services leading to supported employment consistent with consumer choice and abilities.

\$ 1,674,107 \$ 1,757,812

Outputs:

Eligible Clients Served in Supported Employment

1,383 1,440

Efficiencies:

Cost per Client Rehabilitated and Employed

1.210 1.221

Total, Objective A.1: Provide vocational rehabilitation services to people with disabilities

\$ 150,029,544 \$ 162,479,990

A.2. Objective:

Provide consumer & counselor-supported services to support employment

Outcomes:

Percent of Population Provided Extended Rehabilitation Services Whose Salary Exceeds the Standard Established by the Department of Labor

65% 65%

Percent of Population With Disabilities Maintaining Employment Due to Personal Attendant Services

.9% .9%

A.2.1. Strategy: EXTENDED REHABILITATION

Provide consumer and counselor supported Extended Rehabilitation Services to support people with disabilities in employment.

\$ 4,058,875 \$ 4,058,875

Outputs:

ERS Clients Working in Community Integrated Employment

600 600

ERS Clients Working in Sheltered Employment

729 729

Average Hourly Wage of People Placed in Jobs Through Extended Rehabilitation Services

2.7 2.7

Efficiencies:

Average Cost per Community Integrated Job

2,435 2,435

Average Cost per Sheltered Job

3,563 3,563

A.2.2. Strategy: PERSONAL ATTENDANT

Provide consumer-driven Personal Attendant Services to support people with disabilities in competitive employment.

\$ 500,000 \$ 500,000

Outputs:

Number of People Receiving Personal Attendant Services

68 66

REHABILITATION COMMISSION (Continued)

Efficiencies:

Cost per Person Receiving Personal Attendant Services	7.353	7.575
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Total, Objective A.2: Provide consumer & counselor-supported services to support employment

	<u>\$ 4,558,875</u>	<u>\$ 4,558,875</u>
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A.3. Objective:

Provide Independent Living Services to people with severe disabilities

Outcomes:

Percent of People in Need of Independent Living Services Receiving Services	1.9%	1.9%
Percent of Counties Served by Independent Living Centers	6.3%	6.3%
Percent of Eligible People With Disabilities in Need of Comprehensive Rehabilitation Services Receiving Services	12%	11.3%
Percent of People Who are Deaf-Blind Multihandicapped Receiving Residential Services	3.7%	4.3%

A.3.1. Strategy: I.L. CENTERS

Provide funding to consumer-led Independent Living Centers to enable them to provide consumer-directed services to people with severe disabilities.

	\$ 2,669,729	\$ 2,669,729
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Outputs:

People Receiving Services From Independent Living Centers	3,304	3,304
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Efficiencies:

Cost per Person Served by Independent Living Centers	808	808
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A.3.2. Strategy: I.L. SERVICES

Provide consumer-directed and counselor-supported Independent Living Services to people with severe disabilities.

	\$ 2,523,005	\$ 2,523,005
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Outputs:

People Receiving Independent Living Services	1,513	1,513
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Efficiencies:

Cost per Person Receiving Independent Living Services	1,668	1,668
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A.3.3. Strategy: TRAUMATIC INJURIES

Provide consumer-directed and counselor-supported Comprehensive Rehabilitation Services for people with traumatic brain injuries or spinal cord injuries.

	\$ 7,556,972	\$ 7,556,972
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Outputs:

People Receiving Comprehensive Rehabilitation Services	266	252
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Efficiencies:

Cost per CRS Client	28,410	29,988
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A.3.4. Strategy: DEAF-BLIND

Provide an array of consumer-directed services to people who are Deaf- Blind Multihandicapped so that they can live as independently as possible.

	<u>\$ 1,200,000</u>	<u>\$ 1,500,000</u>
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Outputs:

Persons Receiving Individualized Residential Services	41	47
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Efficiencies:

Cost Per Client Served	28,410	29,988
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Total, Objective A.3: Provide Independent Living Services to people with severe disabilities

	<u>\$ 13,949,706</u>	<u>\$ 14,249,706</u>
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A.4. Objective:

Provide TRC services in response to the changing needs of individuals

REHABILITATION COMMISSION

(Continued)

Outcomes:

Percent of TRC Vocational Rehabilitation Client Population Receiving TRC Services More Than Once	2%	2%
Percent of Students With Disabilities in Need of TRC Transition Planning Receiving Services	1%	1%
A.4.1. Strategy: TRANSITIONAL PLANNING Provide Transition Planning Services to students with disabilities.	\$ 406,905	\$ 406,905
Outputs: Number of Students Receiving Transition Planning Services	405	405
Efficiencies: Cost Per Student Served	1.005	1.005
Total, Goal A: SERVICE DELIVERY SYSTEM	\$ 168,945,030	\$ 181,695,476

B. Goal: DISABILITY DETERMINATION

We will enhance service to persons with disabilities by achieving accuracy and timeliness within the Social Security Administration disability program guidelines and improving the cost-effectiveness of the decision-making process in the Disability Determination Services.

B.1. Objective:

Increase decisional accuracy & timeliness of determinations

Outcomes:

Mean Processing Time as Measured by the Statistical Reporting System	105	105
B.1.1. Strategy: DDS ADMINISTRATION Enhance cost-effective methods in administering disability determination services.	\$ 65,718,198	\$ 64,395,149
Outputs: Number of Cases Determined	230,992	230,992
Efficiencies: Cost Per Case Determination	285	279

C. Goal: PROGRAM INITIATIVES

We will strengthen our continuum of direct service programs with legislative and strategic initiatives which promote innovation in meeting the needs of Texans with disabilities, assure protection of consumer rights and safety, and emphasize effective interaction with consumers and advocates.

C.1. Objective:

Ensure occupational therapy & developmental disability meet standards

Outcomes:

Ratio of Complaints Filed per 100 Licensee Population	.33	.36
Percent of Complaints Resolved Resulting in Disciplinary Action	30%	30%
Recidivism Rate for Those Receiving Disciplinary Action	.04	.04
Percent of Each DD Plan Objective Achieved	80%	80%
C.1.1. Strategy: LICENSING & ENFORCEMENT To provide consumer protection by ensuring that licensed occupational therapists and occupational therapy assistants meet state-established standards.	\$ 160,000	\$ 160,000
Outputs: Total Number of Individuals Licensed	3,600	3,877
Complaints Received	12	14
Investigations Conducted	32	32

REHABILITATION COMMISSION (Continued)

Efficiencies:

Average Time for Complaint Investigation
Average Cost Per Investigation

65
300

65
300

C.1.2. Strategy: DEVELOPMENTAL DISABILITY

Promote the independence, productivity, and
integration of people with developmental disabilities
in Texas.

\$ 4,363,454 \$ 4,363,454

Outputs:

Number of State Plan Objectives

20

20

Efficiencies:

Administrative Costs as Percent of All Costs

5.8%

5.8%

Total, Objective C.1: Ensure occupational
therapy & developmental disability meet
standards

\$ 4,523,454 \$ 4,523,454

Total, Goal C: PROGRAM INITIATIVES

\$ 4,523,454 \$ 4,523,454

D. Goal: SEC 146, 1993 SALARY INC
Section 146, 1993 Salary Increase

\$ 1,984,739 \$

Grand Total, REHABILITATION COMMISSION

\$ 241,171,421 \$ 250,614,079

Method of Financing:

General Revenue Fund
Comprehensive Rehabilitation Fund No. 107
Federal Funds, estimated
Interagency Contracts
Earned Federal Funds

\$ 39,313,882 \$ 42,021,148
7,556,972 7,556,972
193,455,567 200,190,959
365,000 365,000
480,000 480,000

Total, Method of Financing

\$ 241,171,421 \$ 250,614,079

Schedule of Exempt Positions and Per Diem of Commission Members

Commissioner	\$80,204	\$80,204
Per Diem of Commission Members	4,960	4,960
Per Diem of Board Members	1,800	1,800

Bond Debt Service \$ 2,465,117 \$ 2,458,175

Administrative and Support Cost as a Percent of Expenditures 7.4% 7.1%

1. **Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

REHABILITATION COMMISSION (Continued)

	<u>1994</u>	<u>1995</u>
a. Acquisition of Information Resource Technologies	\$ 6,082,349	\$ 2,863,052
Total, Capital Budget	<u>\$ 6,082,349</u>	<u>\$ 2,863,052</u>
Method of Financing (Capital Budget):		
Federal Funds	<u>6,082,349</u>	<u>2,863,052</u>
Total, Method of Financing (Capital Budget)	<u>\$ 6,082,349</u>	<u>\$ 2,863,052</u>
2. Comprehensive Rehabilitation Fund. Funds authorized in V.T.C.A., Human Resources Code, Section 111.060, and deposited in the Comprehensive Rehabilitation Fund are hereby appropriated to the Texas Rehabilitation Commission for the biennium beginning September 1, 1993 to be used for purposes provided in V.T.C.A., Human Resources Code, Section 111.052.		
3. Deaf-Blind Services. It is the intent of the Legislature that residential services provided in facilities from appropriations for Deaf-Blind Multi-handicapped Services, access additional federal funding through the conversion to Intermediate Care Facilities for the Mentally Retarded under the state's long term care bed plan, or through the development of services under one of the state's medicaid waiver programs. Savings from the conversion of facilities are to be used to initiate new residential facilities or alternatives to serve deaf-blind individuals.		
It is also the intent of the Legislature that the Texas Rehabilitation Commission, the Texas Department of Mental Health and Mental Retardation, the Health and Human Services Commission, and the Texas Department of Human Services take all steps necessary to maximize the amount of medical assistance paid on behalf of residents of Deaf-Blind Multi-handicapped Strategy group homes, including exemption of these homes from the Intermediate Care Facilities bed planning priorities and the related 1/2 mile proximity rule.		
4. Sunset Contingency. Funds appropriated above to the Texas Rehabilitation Commission for fiscal year 1995 for the Texas Advisory Board of Occupational Therapy are made contingent on the continuation of the board by the Legislature. In the event the board is not continued, the funds appropriated for fiscal year 1994 or as much thereof as may be necessary are to be used to provide for the phase out of board operations.		

YOUTH COMMISSION

	For the Years Ending	
	August 31, 1994	August 31, 1995
A. Goal: PROTECT PUBLIC		
To protect the public from the delinquent and criminal acts of TYC youth while they are in institutional or community-based primary care programs.		
A.1. Objective:		
Prevent arrests of TYC youth through physical security		
Outcomes:		
Arrests Prevented Through Custody in Primary Care	7,775	8,220
A.1.1. Strategy: PROVIDE CAPACITY		
Provide sufficient capacity for a continuum of TYC-operated and contracted primary care under conditions designed for the youths' welfare and the interests of the public.		
	\$ 82,847,691	\$ 68,986,320
Outputs:		
Average Daily Population: Primary Care	2,152	2,269
Six-Month Minimum Length of Stay Rate	69%	71%
Youth per On-Duty Direct Care Staff	8	8
Efficiencies:		
Capacity Cost in Primary Care per Youth Day	79.06	80.76
A.1.2. Strategy: ASSESS RISK AND TREATMENT		
Provide a system of assessment to determine the relative security risk and treatment needs of committed youth so they are placed in appropriate programs.		
	\$ 1,434,107	\$ 1,534,107
Outputs:		
Average Daily Population: Reception Center	112	124
Efficiencies:		
Assessment Cost in Reception Center per Youth Day	35.08	33.9
Total, Objective A.1: Prevent arrests of TYC youth through physical security	<u>\$ 84,281,798</u>	<u>\$ 70,520,427</u>
Total, Goal A: PROTECT PUBLIC	<u>\$ 84,281,798</u>	<u>\$ 70,520,427</u>
B. Goal: ENABLE PRODUCTIVITY		
To enable TYC youth to become productive and responsible citizens.		
B.1. Objective:		
Increase percentage of TYC youth who attain diploma/job skills/employ		
Outcomes:		
Constructive Activity Rate	26%	27%
Diploma or GED Rate	24%	25%
B.1.1. Strategy: EDUCATION PROGRAMS		
Provide or facilitate 12-month academic, vocational/technical, and GED preparation programs.		
	\$ 10,722,173	\$ 9,364,889
Outputs:		
Average Daily Attendance in TYC-Operated Schools	1,296	1,338
Average Daily Attendance in Vocational Training in TYC-Operated Schools	778	803

YOUTH COMMISSION (Continued)

Efficiencies:

Education Cost in TYC-Operated Schools per Youth Day	19.59	20.1
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B.1.2. Strategy: INDEPENDENT LIVING

Provide independent living preparation training and transitional assistance.

\$	601,571	\$	601,571
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Outputs:

Average Daily Population: Independent Living	115	115
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Youth Completing Independent Living Preparation Programs	45	45
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Efficiencies:

Independent Living Treatment Cost per Youth Day	14.33	14.33
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Total, Objective B.1: Increase percentage of TYC youth who attain diploma/job skills/employ

\$	<u>11,323,744</u>	\$	<u>9,966,460</u>
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Total, Goal B: ENABLE PRODUCTIVITY

\$	<u>11,323,744</u>	\$	<u>9,966,460</u>
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C. Goal: PROVIDE REHABILITATION

To reduce the delinquent and criminal behavior of TYC youth released from institutional and community-based primary treatment programs.

C.1. Objective:

Keep rearrest rate below 50% for TYC youth released through FY 1995

Outcomes:

Rearrest Rate	52%	54%
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Rearrest Severity Rate	30%	31%
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Reincarceration Rate: Total	56%	57%
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C.1.1. Strategy: PROVIDE BASIC TREATMENT

Provide a system of integrated primary treatment and aftercare programs.

\$	9,165,006	\$	9,165,006
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Outputs:

Average Daily Population: Aftercare	1,979	1,990
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Positive Discharge Rate	37%	37%
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Efficiencies:

Basic Treatment Cost per Youth Day	6.46	6.33
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C.1.2. Strategy: SPECIALIZED TREATMENT

Provide a system of specialized treatment programs for youth with the specialized needs of capital offense history, sex offense history, chemical abuse dependence, or emotional disturbance.

\$	2,348,217	\$	2,348,217
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Outputs:

Average Daily Population: Specialized Treatment	469	512
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Efficiencies:

Specialized Treatment Cost per Youth Day	17.08	20.73
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C.1.3. Strategy: INTERSTATE COMPACT

Implement the interstate cooperative agreement regarding the return of runaways and the supervision of juvenile probationers and parolees.

\$	74,440	\$	74,440
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Outputs:

Youth Served Through Interstate Compact	2,200	2,460
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Total, Objective C.1: Keep rearrest rate below 50% for TYC youth released through FY 1995

\$	<u>11,587,663</u>	\$	<u>11,587,663</u>
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Total, Goal C: PROVIDE REHABILITATION

\$	<u>11,587,663</u>	\$	<u>11,587,663</u>
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YOUTH COMMISSION (Continued)

D. Goal: SEC 146, 1993 SALARY INC
Section 146, 1993 Salary Increase

\$ 1,236,961 \$

Grand Total, YOUTH COMMISSION

\$ 108,430,166 \$ 92,074,550

Method of Financing:

General Revenue Fund	\$ 80,738,767	\$ 85,571,522
Federal Funds	5,072,703	5,413,807
Appropriated Receipts	914,221	914,221
Earned Federal Funds, estimated	175,000	175,000
Bond Proceeds - General Obligation Bonds	<u>21,529,475</u>	<u> </u>

Total, Method of Financing

\$ 108,430,166 \$ 92,074,550

Schedule of Exempt Positions and Per Diem

Executive Director	\$80,204	\$80,204
Per Diem	3,600	3,600

Bond Debt Service	\$ 7,312,382	\$ 10,179,054
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Administrative and Support Cost as a Percent of Expenditures	7.2%	7.3%
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- I. Capital Budget.** None of the funds appropriated above may be expended for capital budget items except as listed below. The amounts shown below shall be expended only for the purposes shown and are not available for expenditure for other purposes. Amounts appropriated above and identified in this provision as appropriations either for "Lease payments to the Master Equipment Lease Purchase Program" or for items with an "(MELPP)" notation shall be expended only for the purpose of making lease-purchase payments to the Texas Public Finance Authority pursuant to the provisions of V.T.C.S., Art. 601d, Sec. 9A.

	<u>1994</u>	<u>1995</u>
a. Acquisition of Lease-purchase of Information Resource Technologies:		
(1) Casework Automation (MELPP)	\$ 375,336	\$ 375,336
(2) Mainframe Upgrade (1990/1991)	<u>308,829</u>	<u>289,754</u>
b. Lease Payments to the Master Equipment Lease Purchase Program (1992/1993)	523,608	533,004
c. Renovations to Comply with ADA	2,125,655	U.B.
d. Install Electronic Surveillance Equipment	1,393,611	U.B.
e. Flammable Material & Tire Storage	419,927	U.B.
f. Renovate/Repair/Replace Dorms and Support Facilities	11,797,287	U.B.
g. Renovations to Bring Academic Buildings into Compliance with Life Safety Codes	1,757,284	U.B.
h. Repair/Replace Utilities & Site Work	<u>\$ 4,035,711</u>	<u>\$ U.B.</u>
Total, Capital Budget	<u>\$ 22,737,248</u>	<u>\$ 1,198,094</u>

YOUTH COMMISSION (Continued)

Method of Financing (Capital Budget):

General Revenue	\$ 1,207,773	\$ 1,198,094
Bonded Construction Funds	<u>21,529,475</u>	<u>\$ U.B.</u>
Total, Method of Financing	<u>\$ 22,737,248</u>	<u>\$ 1,198,094</u>

Of the bonded construction funds appropriated above, an amount not to exceed \$300,000 may be expended for the repair, renovation, or replacement of swimming pool facilities.

2. **Reporting Requirements.** It is the intent of the Legislature that the Texas Youth Commission and its institutions constitute a single agency for the purposes of purchasing, paying and reporting, and submitting of proposed budget requests.
3. **Services Authorized.** Funds appropriated above include amounts to be used for the care and treatment of children under the custody of the Texas Youth Commission. The funds may be expended for purchasing services, including appropriate housing, meals, psychiatric, casework, and counseling services from existing public or private agencies, and all necessary expenses.
4. **Interagency Contract Authorized, West Texas Children's Home.** The Texas Youth Commission is authorized to lease from The University of Texas, for a term of years and upon conditions that are mutually agreeable to the Texas Youth Commission and The University of Texas, under authority of the Interagency Cooperation Act, certain facilities situated at Pyote Air Force Base, in Ward County, Texas (same being located in Block 16, University Lands). The Texas Youth Commission is authorized to pay to The University of Texas as rental for such a lease a sum not to exceed Ten Dollars (\$10) per year.
5. **Unexpended Balances.** Any unobligated balances as of August 31, 1993, in appropriations made by House Bill No. 1, Acts of the Seventy-second Legislature, First Called Session, 1991, as identified in Article II, Section 1, Item 6., Capital Budget and rider 2., Capital Budget, and any other funds that have had prior approval of the Texas Youth Commission for expenditure for specific capital improvement projects are reappropriated for the identical purposes for the biennium beginning September 1, 1993.
6. **Other Agency Funds.** Any unexpended balances remaining in Independent School District Funds, the Student Benefit Fund, the Canteen Revolving Funds and the Conference Account as of August 31, 1993 and August 31, 1994 and any revenues accruing to those funds are appropriated to those funds for the succeeding fiscal years. Funds collected by vocational training shops at Texas Youth Commission institutions, including unexpended balances as of August 31, 1993 are hereby appropriated for the purpose of purchasing and maintaining parts, tools, and other supplies necessary for the operation of those shops.
7. **Education in Public School System.** Any of the money appropriated by this Article to the Texas Youth Commission may be expended to pay another Independent School District for the education of students of Texas Youth Commission institutions.
8. **Revolving Funds.** The Texas Youth Commission may establish out of any funds appropriated herein a revolving fund not to exceed Ten Thousand Dollars (\$10,000) in the Central Office, and Ten Thousand Dollars (\$10,000) in each institution, regional office, or facility under its direction. Payments from these revolving funds may be made as directed by the commission. Reimbursement to such revolving funds shall be made out of appropriations provided for in this Article.

YOUTH COMMISSION (Continued)

9. **Student Employment.** Subject to the approval of the Texas Youth Commission, students residing in any Texas Youth Commission facility may be assigned necessary duties in the operations of the facility and be paid on a limited basis out of any funds available to the respective institutions or facility not to exceed Twenty-five Thousand Dollars (\$25,000) a year for each institution and Ten Thousand Dollars (\$10,000) a year for any other facility.
10. **Emoluments.** The Executive Director is authorized to determine emoluments for certain positions provided that the provision of such emoluments is necessary to effectively carry out the job responsibilities of the position.
11. **Grant Funds, Indirect Costs.** The Texas Youth Commission may transfer from grant funds accepted, all amounts approved for indirect costs and other administrative fees allowed by agreement with the agency administering the grant or the grantor, into the regular appropriations to the commission. Any such amounts shall be appropriated for the cost of salaries, supplies, and the operating costs of the activities funded by the regular appropriations.
12. **Salaries, Education Professionals.**
 - a. Each principal, supervisor, and classroom teacher employed in an institution operated by the Texas Youth Commission shall receive a monthly salary to be computed as follows: The applicable monthly salary rate plus increments specified in Section 16.056, Texas Education Code, as amended, shall be multiplied by twelve to arrive at an annual salary rate. Such rate shall be divided by the number of days required in Section 16.055, Texas Education Code, for pay grades 1-11 twelve-month employees, and the resulting daily rate shall be multiplied by the number of on-duty days required of Texas Youth Commission educators, resulting in the adjusted annual salary. The adjusted annual salary is to be divided by twelve to arrive at the monthly rate. Salary rates for educational aides shall be calculated in the same manner, using 60% of the salary rate plus increments specified in Section 16.056, Texas Education Code.
 - b. The Texas Youth Commission may authorize salary rates at amounts above the adjusted annual salary determined in the preceding formula, but such rates, including longevity for persons commencing employment on September 1, 1983, or thereafter, shall never exceed the rates of pay for like positions paid in the public schools of the city in which the Texas Youth Commission institution is located. Any authorized local increments will be in addition to adjusted annual salaries.
13. **Reimbursement Authority.** When the Texas Youth Commission determines that such expenditures will result in greater economy to the state, funds allocated to any institution or facility under the control of the Texas Youth Commission (including the Central Office) may be expended to reimburse any other such institution or facility for the cost of non-routine maintenance and repair services, warehouse and supply services, printing services, micrographic services, student transportation, training services and vehicle maintenance furnished to the reimbursing institution or facility.
14. **Support Payment Collections.** Out of the funds appropriated above, \$30,000 in each year of the biennium is appropriated specifically to provide for the administrative activities necessary to maximize the collection of court ordered support payments pursuant to V.T.C.A., Family Code Section 54.06(a). The Texas Youth Commission shall annually report to the Governor's Office of Budget and Planning and to the Legislative Budget Board the number of active accounts, including the amounts owed to the state pursuant to Section 54.06(a) court orders, and the total amount of funds collected.

YOUTH COMMISSION
(Continued)

15. **Parrie Haynes Ranch.** From the funds appropriated above, none can be used for the operation or maintenance of the Parrie Haynes Ranch. In addition, the commission is directed to create an advisory committee comprised of adjoining land owners and community leaders not to exceed seven members. The commission is prohibited from allowing delinquent children on the Parrie Haynes Ranch until the advisory committee presents its recommendations to the commission.
16. **Federal Foster Care Claims.** Within the appropriations made above, the Department of Human Services, the Texas Youth Commission and the Juvenile Probation Commission shall:

document possible foster care claims for children in juvenile justice programs and maintain an interagency agreement to implement strategies and responsibilities necessary to claim additional federal foster care funding; and

consult with juvenile officials from other states and national experts in designing better foster care funding initiatives. These initiatives should include, but not be limited to, claiming federal foster care reimbursement for child welfare training contracts and developing financing for family preservation programs.
17. **Construction Contingency.** Out of the funds appropriated above in Strategy A.1.1. and B.1.1. for construction, the amount of \$21,529,475 (as shown in Rider 1., Capital budget, item c-h.) is contingent upon proceeds of the issuance of bonds authorized by the approval of the voters of S.J.R. No. 45 and enactment of S.B. 1068 or similar legislation, 73rd Legislature, Regular Session.
18. **Contingency Appropriation for House Bill 819.** Contingent upon the enactment of House Bill 819, Seventy-third Legislature, Regular Session, the Texas Youth Commission is hereby appropriated \$160,000 out of the General Revenue Fund for fiscal year 1995 for the purpose of implementing the provisions of the Act.

**SPECIAL PROVISIONS RELATING ONLY TO INSTITUTIONS, AGENCIES,
OR OFFICES UNDER THE JURISDICTION OF THE BOARD OF HEALTH,
BOARD OF MENTAL HEALTH AND MENTAL RETARDATION AND
THE TEXAS YOUTH COMMISSION**

Sec. 2. **Special Provisions.** The following special provisions, unless otherwise specified, shall apply only to the facilities, agencies, or offices under the jurisdiction of the Board of Health, Board of Mental Health and Mental Retardation, and the Texas Youth Commission.

1. Salary Provisions.

a. Classified Positions.

- (1) The Department of Mental Health and Mental Retardation and the Department of Health are authorized to pay an additional night shift salary differential not to exceed 10 percent of the monthly pay rate to personnel who work the 3 p.m. to 11 p.m. or the 11 p.m. to 7 a.m. shift or its equivalent.

b. Teachers.

- (1) Each principal, supervisor, or teacher at a state facility shall receive as a minimum salary the monthly salary rate, plus increments specified in Sections 16.056 and 30.83, Education Code and shall be required to have a provisional or professional certificate issued under Subchapter B, Chapter 13, Education Code.
- (2) Salary rates for principals, supervisors, teachers, and coaches in excess of the minimum amounts specified in Sections 16.056 and 30.83, Education Code shall not exceed the rates of pay for like positions paid in the public schools of the city or county in which the state facility is located. Qualified principals, supervisors, or teachers shall receive the monthly salary rate plus increments multiplied by the number of months of service authorized by the facility. In determining the rate of pay for comparison with like positions in the public schools, the agencies covered by this provision shall include longevity paid to persons commencing employment under this section on September 1, 1983, or thereafter.

c. Services to Employees. Out of the appropriations authorized, the respective governing boards covered by this provision may provide treatment and hospitalization, at the facilities under their direction, of employees injured in the performance of their duties and may reimburse employees in an amount not to exceed \$500 per incident per employee for damage to eyeglasses, hearing aids, false teeth, and other prosthetic devices caused by agency clients.

d. Expenditure of Funds for Student Raised Livestock. Students at any facility covered by this provision may raise livestock for the purpose of entering said livestock in livestock exhibitions; provided, however, the facility shall be reimbursed for the expense of raising said livestock.

**SPECIAL PROVISIONS RELATING ONLY TO INSTITUTIONS, AGENCIES,
OR OFFICES UNDER THE JURISDICTION OF THE BOARD OF HEALTH,
BOARD OF MENTAL HEALTH AND MENTAL RETARDATION AND
THE TEXAS YOUTH COMMISSION**

(Continued)

- e. **Fire Prevention and Safety.** In instances in which regular employees of facilities are assigned extra duties in fire prevention programs, the following payments are authorized in addition to the salary rates stipulated by the provisions of Article V of this Act relating to the position classifications and assigned salary ranges:

Fire Chief	\$75 per month
Assistant Fire Chief	\$65 per month
Fire Brigade Members	\$50 per month

2. Charges to Employees and Guests.

- a. Collections for services rendered employees and guests shall be made by a deduction from the recipient's salary or by cash payment in advance. Such deductions and other receipts for these services from employees and guests are hereby reappropriated to the facility. Refunds of excess collections shall be made from the appropriation to which the collection was deposited.
- b. As compensation for services rendered, any facility under the jurisdiction of the respective governing boards may provide free meals for food service personnel and volunteer workers, and may furnish housing facilities, meals and laundry service in exchange for services rendered by interns, chaplains in training, and student nurses.

3. Gifts, Donations, and Federal Grants.

- a. The state agencies covered by this section are authorized to accept gifts, donations, and federal grants for the programs and projects intended to improve the care and treatment of patients or students for which the agencies are responsible. Such gifts, donations, and grants are appropriated for the purposes for which they are made available, however, the respective agencies shall not incur any indebtedness which would necessitate a supplemental or additional appropriation nor deplete any of the funds appropriated to an amount which would necessitate a supplemental or additional appropriation.
 - b. In carrying out the wishes of the donor within the meaning of this subsection, the state agencies are authorized to enter into such contracts with any person, firm, corporation or governmental agency as may be necessary.
 - c. Any gifts, grants, or donations received pursuant to this subsection shall be expended only in accordance with the applicable provisions of this act, and subject to the restrictions stated herein.
- 4. New or Additional Facilities.** No funds appropriated may be spent for constructing new or additional facilities or for the purchase of sites therefor, without specific authorization of the Legislature. All facilities shall be kept where they are located by the Legislature, and all new buildings to be constructed shall be on these sites unless otherwise specifically authorized by the Legislature. For the purpose of this subsection, specific authorization may be granted either by basic statute or special authorization in this act.
- 5. Transfer of Fund Balances.** Any interest, payments on principal, or balances remaining as of August 31, 1993, in Fund No. 15, 16, 17, and 18 are to be transferred by the State Comptroller and the State Treasurer to the General Revenue Fund either annually or semiannually.

**SPECIAL PROVISIONS RELATING ONLY TO INSTITUTIONS UNDER
THE JURISDICTION OF THE BOARD OF HEALTH AND BOARD OF
MENTAL HEALTH AND MENTAL RETARDATION**

Sec. 3. **Special Provisions.** The following special provisions, unless otherwise specified, shall apply only to the facilities, agencies, or offices under the jurisdiction of the Board of Health and Board of Mental Health and Mental Retardation.

1. **Patient or Student Assistance.** Subject to the approval and rules and regulations of the governing boards covered by this section, patients or students in any state facility who are assisting in the operation of the facility as part of their therapy, may receive compensation out of any funds available to the respective facilities.
2. **Revolving Petty Cash Funds.**
 - a. Each facility under the Board of Health and Board of Mental Health and Mental Retardation may establish a petty cash fund to be maintained in cash or at a local bank. The petty cash fund, not to exceed \$25,000, shall be used only for making emergency payments and small purchases which will increase the efficiency of the operation: for payments to client workers on a regular payday basis; for use as change funds in specific locations where financial activities of the agency require a change fund, and for supplies and equipment purchases for sheltered workshops.
3. **Surplus Property.** In order to conserve funds appropriated, surplus personal property may be transferred from one facility or agency to another with or without reimbursement. The Department of Mental Health and Mental Retardation may transfer surplus personal property to community MHMR centers with or without reimbursement. Surplus personal property belonging to any facility or agency may be sold; provided, however, that such transfers or sales shall be made under the same procedure as provided by Article 601b, § 9.01, Vernon's Annotated Civil Statutes. In making such transfers or sales, the agencies may do so without the necessity of contracts as required by V.T.C.A. Government Code, § 771, known as the Interagency Cooperation Act.
4. **Out-patient Clinics.**
 - a. Unless otherwise restricted, the Board of Health and Board of Mental Health and Mental Retardation are authorized to charge for treatment and medication to patients treated on an out-patient basis at rates not to exceed the actual cost. An additional charge may be made for medication dispensed to patients at a rate not to exceed the cost to the state.
 - b. Unless otherwise restricted, proceeds from the sale of medications and from treatment are hereby reappropriated to the respective out-patient clinics or facilities.

**SPECIAL PROVISIONS RELATING ONLY TO INSTITUTIONS, AGENCIES,
OR OFFICES UNDER THE JURISDICTION OF THE BOARD OF HEALTH,
BOARD OF HUMAN SERVICES, BOARD OF MENTAL HEALTH AND
MENTAL RETARDATION AND THE BOARD OF PROTECTIVE AND
REGULATORY SERVICES**

- Sec. 4. **Special Provisions.** The following special provisions, unless otherwise specified, shall apply only to the facilities, agencies, or offices under the jurisdiction of the Board of Health, Board of Human Services, Board of Mental Health and Mental Retardation and Board of Protective and Regulatory Services.
1. **Data Processing Personnel.** The Department of Health, Department of Human Services, Department of Mental Health and Mental Retardation, and the Department of Protective and Regulatory Services may pay an evening or night shift salary differential not to exceed fifteen percent (15%) of the monthly pay rate to personnel in data processing operations who work the 3:00 p.m. to 11:00 p.m. shift or 11:00 p.m. to 7:00 a.m. shift, or their equivalents. A weekend shift salary differential not to exceed five percent (5%) of the monthly pay rate may be paid to persons who work weekend shifts. The evening or night shift salary differential may be paid in addition to the weekend shift salary differential for persons working weekend, evening or night shifts.

**SPECIAL PROVISIONS RELATING TO ALL ARTICLE II - HEALTH, WELFARE,
AND REHABILITATION AGENCIES**

- Sec. 5. **Special Provisions.** The following special provisions shall apply to all Article II - Health, Welfare, and Rehabilitation agencies.
1. **Interagency Transfers.** As an exception to other provisions of this act, the commissioner of Health and Human Services, established in Art. 4413 (502), V.T.C.S., is authorized to transfer funds between the health and human services agencies which receive appropriations in this article and are listed in Art. 4413 (502), V.T.C.S. with prior approval of the Legislative Budget Board. No one transfer action may exceed 5% of the total yearly appropriation amount of the agency from which funds are being transferred. The total amount of transfers made in any fiscal year may not exceed 5% of total appropriations made to the agencies affected by this provision. All transfers that are made shall be reported to the Governor's Budget Office, the Legislative Budget Board and the Comptroller of Public Accounts.
2. **Approval of Transfers of Medicaid - Title XIX Funds.** As an exception to other provisions of this act, a transfer that exceeds \$1 million of Medicaid - Title XIX funds between strategies of an agency receiving appropriations in this article cannot be made without the prior approval of the commissioner of Health and Human Services established in Art. 4413 (502), V.T.C.S. The commissioner shall establish procedures that expedite the approval process.
3. **Costs related to co-location of services and to inter-agency sharing of support functions and services.** To provide an efficient and effective method of paying common support costs related to co-location of human services as required pursuant to the provisions of V.T.C.S., Art. 4413(505), Sec. 3.08, and/or costs of performing support functions for multiple agencies, funds may be transferred between agencies for payment of such costs and agencies are authorized to deposit those funds in separate accounts for the purpose of paying shared costs including, but not limited to, postage, occupancy costs, equipment repair, telephones and

SPECIAL PROVISIONS RELATING TO ALL ARTICLE II - HEALTH, WELFARE, AND REHABILITATION AGENCIES

(Continued)

telephone system costs, office printing costs, supplies, freight and transport costs, EDP systems, or other business functions.

4. **ICF/MR Fund Transfer Authorization.** In order to maximize federal funds, the Health and Human Services Commission shall transfer from line item B.1.3., MR Vocational Development, Department of Mental Health and Mental Retardation to A.1.5., ICF-MR/RC Payments, Department of Human Services, an amount equal to the state's share for reimbursement of vocational services provided by Community Mental Retardation Authorities under the ICF/MR or HCS rate.

Furthermore, the Commission shall use savings to general revenue generated by the infusion of additional federal funds resulting from reimbursing vocational services under the ICF/MR or HCS rate to reduce the impact of other budget reductions made to agencies within Article II included in this Act.

Savings identified within TXMHMR institution and community programs resulting from implementation of a facility specific rate methodology shall likewise be used to offset other budget reductions made in this Act. The Commission shall transfer from B.1.1., MR Community Residential, Department of Mental Health and Mental Retardation to A.1.5., ICF-MR/RC Payments, Department of Human Services, an amount equal to the state's share for providing an increase in ICF/MR reimbursement over the 1993 rate under a facility specific methodology.

5. **Contingency Appropriations.** Contingent upon the passage of Senate Bill 86 and/or Senate Bill 1058, by the 73rd Legislature, Regular Session, any receipts and balances collected by an agency statutorily assigned responsibility for hospital and/or nursing home regulation are hereby appropriated to the responsible agency for the biennium beginning September 1, 1993.

Contingent upon the passage of House Bill 1510, 73rd Legislature, Regular Session, any funds authorized to be transferred from one agency to another agency are hereby appropriated to the receiving agency for the biennium beginning September 1, 1993. Any receipts deposited into the Maternity Home Licensing Fund are appropriated to the Department of Protective and Regulatory Services for the biennium beginning September 1, 1993.

**RECAPITULATION - ARTICLE II
HEALTH, WELFARE AND REHABILITATION AGENCIES**

		<u>GENERAL REVENUE</u>	<u>OTHER FUNDS</u>	<u>TOTAL</u>
Aging, Department on	1994	\$ 5,307,262	\$ 50,409,176	\$ 55,716,438
	1995	5,297,505	50,371,694	55,669,199
Alcohol and Drug Abuse, Commission on	1994	27,384,422	110,426,210	137,810,632
	1995	27,339,116	110,270,465	137,609,581
Blind, Commission for the	1994	7,497,203	31,563,648	39,060,851
	1995	7,497,702	30,809,739	38,307,441
Cancer Council	1994	4,120,444	110,823	4,231,267
	1995	4,111,080	110,823	4,221,903
Children's Trust Fund of Texas Council	1994		1,879,349	1,879,349
	1995		1,897,323	1,897,323
Deaf, Commission for the	1994	771,093	275,900	1,046,993
	1995	756,795	279,200	1,035,995
Early Childhood Intervention, Interagency Council on	1994	19,196,676	18,947,678	38,144,354
	1995	19,184,935	23,467,204	42,652,139
Health, Department of	1994	1,995,016,467	3,756,879,622	5,751,896,089
	1995	2,334,041,276	4,272,964,876	6,607,006,152
Health and Human Services Commission	1994	2,879,836	1,084,279	3,964,115
	1995	2,811,174	1,082,902	3,894,076
Human Services, Department of	1994	1,162,778,170	2,133,609,219	3,296,387,389
	1995	1,165,452,437	2,109,728,756	3,275,181,193
Mental Health and Mental Retardation, Department of	1994	1,043,843,282	79,716,078	1,123,559,360
	1995	1,024,269,725	73,370,253	1,097,639,978
Probation Commission, Juvenile	1994	39,021,933	2,648,944	41,670,877
	1995	38,997,379	2,649,308	41,646,687
Protective and Regulatory Services, Department of	1994	295,391,282	188,332,029	483,723,311
	1995	285,515,846	191,050,073	476,565,919
Rehabilitation Commission	1994	39,313,882	201,857,539	241,171,421
	1995	42,021,148	208,592,931	250,614,079

RECAPITULATION - ARTICLE II
HEALTH, WELFARE AND REHABILITATION AGENCIES
(Continued)

		<u>GENERAL REVENUE</u>	<u>OTHER FUNDS</u>	<u>TOTAL</u>
Youth Commission	1994	80,738,767	27,691,399	108,430,166
	1995	\$ <u>85,571,522</u>	\$ <u>6,503,028</u>	\$ <u>92,074,550</u>
TOTAL, ARTICLE II - Health, Welfare and Rehabilitation Agencies*	1994	\$ 4,723,260,719	\$ 6,605,431,893	\$ 11,328,692,612
	1995	\$ <u>5,042,867,640</u>	\$ <u>7,083,148,575</u>	\$ <u>12,126,016,215</u>

*Total does not include rider appropriations.